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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
TALLAHASSEE, FLORIDA

FEB 2 7 2015 T. CARTER

COVER LETTER

TO: Registration Section		
Division of Corporations		
SUBJECT: AVAFILLC		
(Name of Limit	ted Liability Cor	npany)
The enclosed member, resignation or dissocia	ition and fee(s	s) are submitted for filing.
Please return all correspondence concerning t	his matter to:	
Saul Mishkin		
(Contact Person)		_
AVAFI		
(Firm/Company)		_
1922 Tigertail Blvd		
(Address)		
Dania Beach, FL 33004		
(City/State and Zip Code)		_
For further information concerning this matte	r, please call:	
Saul Mishkin	305 at (433-8376
(Name of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee		Department of State for: g Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)



FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

15 FEB 26 PM 4: 00

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limit of State is:	ted liability company as it appears on the records of the Florida Department
2. The Florida document	nt/registration number assigned to this limited liability company is:
3. The date this member	r/manager withdrew/resigned or will withdraw/resign is: 2.23.15
Alex Beck	, hereby withdraw/resign as a of Person Resigning)
Mgr	
of this limited liability resignation in writing	
Signature of Dissoc	iating Member or Resigning Manager
Filing Fee: S Certified Copy: S	325.00 (Required) 330.00 (Optional)