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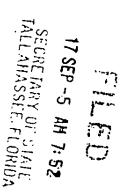
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## COVER LETTER .

TO: Registration Section Division of Corporations
SUBJECT: Toly Investment, LLC (Name of Limited Liability Company)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Hease return all correspondence concerning this matter to:
Maripaz Pereila (Contact Person)
tolu Investments, LC (Firm/Company)
1440 Brickell Brill Dr #301 (Address)
Miami FL 3,3131 (City/State and Zip Code)
For further information concerning this matter, please call:
Mari par Pereira at (754) 246/607 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  \$\sum{\$\sum{\$\text{\$\sum{\$\text{55}\$ Filing Fee}}}\$}\$ \$\sum{\$\sum{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{Filing Fee}}}\$}}\$}\$
STREET/COURIER ADDRESS: MAILING ADDRESS:

Registration Section

P.O. Box 6327

Division of Corporations

Tallahassee, Florida 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

CR2E079 (2/14)



## 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 limited liability company as it appears on the records of the Florida Department
of State is: TOLU INVESTMENTS, LLC
2. The Florida document/registration number assigned to this limited liability company is:
<u>L 10000011159</u>
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 8 28 17
4. 1. ALFONSO LIZARAZO . hereby withdraw/resign as a (Print Name of Person Resigning)
(Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
THASSE THASSE
Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required)  Certified Copy: \$30.00 (Optional)