

L10000082337

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

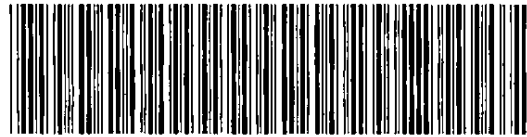
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Wrong form

Office Use Only



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17 JUN 19 PM 4:13
CLERK OF STATE
TALLAHASSEE, FLORIDA

S. WARREN

JUN 20 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 10, 2017

ARIADNA OJEDA
8230 CORAL WAY
MIAMI, FL 33155

SUBJECT: XALES INVESTMENTS, LLC
Ref. Number: L10000082337

We have received your document for XALES INVESTMENTS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren
Regulatory Specialist II

Letter Number: 917A00009284

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: XALES INVESTMENTS LLC
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

ARIADNA M. OJEDA
(Contact Person)

AYUDA CENTER
(Firm/Company)

8230 CORAL WAY
(Address)

MIAMI, FL 33155
(City/State and Zip Code)

For further information concerning this matter, please call:

TXOMIN VISCARRET at (305) 300-2592
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☐ \$25 Filing Fee

☐ \$55 Filing 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



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: XALES INVESTMENTS LLC

2. The Florida document/registration number assigned to this limited liability company is:
L10000082337


3. The date this member/manager withdrew/resigned or will withdraw/resign is: MAY 10, 2017

4. I, TXOMIN VISCARRET, hereby withdraw/resign as a
(Print Name of Person Resigning)

MGRM

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.


Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

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DIVISION OF STATE
TALLAHASSEE, FLORIDA