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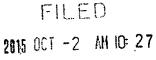


COVER LETTER

TO: Registration Section Division of Corporations Italian Fashion Import USA, 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: Ken Sousa (Contact Person) Italian Fashion Import USA, LLC (Firm/Company) 2201 NW 24 Avenue (Address) Miami, FL 33142 (City/State and Zip Code) For further information concerning this matter, please call: Ken Sousa (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: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314

CR2E079 (2/14)

Tallahassee, Florida 32301







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 l	imited liability company as it appears on the records of the Florida Department
of State is: <u>Irr</u>	PLIAN FASHION IMPORT USA, LLC.
2. The Florida docur	nent/registration number assigned to this limited liability company is:
11000010	
3. The date this men	nber/manager withdrew/resigned or will withdraw/resign is: <u>09/22/2015</u>
	ne of Person Resigning), hereby withdraw/resign as a
MANAGING P	Print Title)
of this limited liabi	ility company and affirm the limited liability company has been notified of my ing.
* Liva	mi lunt
Signature of Dis	sociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)