## L10000122099

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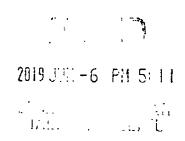
R. WHITE JUN 2 0 2019

## COVER LETTER

TO:			
	Division of Corporations		
SUBJ	OPTIMUS US 801 N.W.	47TH AVE. I, L	.L.C.
	(Name o	f Limited Liability C	ompany)
The e	nclosed member, resignation or dis	ssociation and fee	(s) are submitted for filing.
Please	e return all correspondence concerr	ning this matter to	:
Krisia	a Del Prado		
	(Contact Person)		···
	(Firm/Company)		_
2753	2 SW 162 CT		
	(Address)		<del>_</del>
Home	estead, FL 33031		
	(City/State and Zip Code)		<del></del>
For fu	urther information concerning this r	natter, please call	:
Krisia	a Del Prado	305 at (	608-7136
	(Name of Contact Person)	(Area Coo	le & Daytime Telephone Number)
Epclo 2 \$25	sed please find a check made payal 5 Filing Fee	ble to the Florida □ \$55 Filir	Department of State for: ng Fee & Certified Copy
STRE	EET/COURIER ADDRESS:		MAILING ADDRESS:
_	tration Section		Registration Section
	ion of Corporations		Division of Corporations
	n Building		P.O. Box 6327
	Executive Center Circle nassee, Florida 32301		Tallahassee, Florida 32314

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)

an OPT	limited liability company as i	it appears on the records of the Florida Departn AVE. I, L.L.C.	nent
2. The Florida doca L1000012209	•	signed to this limited liability company is:	
3. The date this me	ember/manager withdrew/resig	gned or will withdraw/resign is:	_
4. I	ado	, hereby withdraw/resign as a	
Manager	ame ty rotam neargaing		
	(Print Title)		
of this limited lia resignation in wr		limited liability company has been notified of	`my
2	2011		
Signature of Di	ssociating Member or Resign	ing Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		
Ceranica Copy.	จองเงง (Optional)		