## LIIOOODAYIII

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Gold Capital, LLC  (Name of Limited Liability Control of Liabil	Company)
The enclosed member, resignation or dissociation and fee	e(s) are submitted for filing.
Please return all correspondence concerning this matter to	o:
Jorge Linkewer	
(Contact Person)	
Gold Capital, LLC	
(Firm/Company)	
18205 Biscayne Boulevard Ste 220	)2
(Address)	2015 FAC:
Aventura, FL 33160	2019 DEC 30 PALLAHASSI
(City/State and Zip Code)	- 30 - 30 - SSE
For further information concerning this matter, please cal	
Jorge Linkewer at (305)	933-1060 PAR TO C
	de & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida  \$25 Filing Fee	Department of State for:  \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	,

CR2E079 (12/13)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

The name of the limited liability company as it ap     of State is: Gold Capital, LLC	ppears on the records of the Florida Department
2. The Florida document/registration number of this L11000024111	s limited liability company is:
3. The date this member withdrew or will withdraw 4. I, Dennis Amoils	, hereby resign as a Managing Member
(Print Name of Person Resigning)	(Print Title)  (Print Title)
Signature of Resigning or Dissociating Manage	er, Member

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