## L110000069607

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
<del></del>					
[a]					
Special Instructions to Filing Officer:					

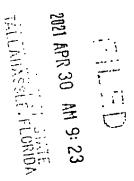




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## **COVER LETTER**

Division of Corporations PMDSR HOLDINGS, LLC SUBJECT: (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: Adis Riveron (Contact Person) Law Office of Pelayo Duran, P.A. (Firm/Company) 4640 NW 7 Street (Address) Miami, Florida 33126 (City/State and Zip Code) For further information concerning this matter, please call: \_ at (\_\_\_\_\_) 266 9780 (Area Code & Daytime Telephone Number) Marisol Perez (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: □ \$25 Filing Fee ☐ \$55 Filing Fee & Certified Copy Mailing Address: Street Address: Registration Section Registration Section **Division of Corporations** Division of Corporations The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E079 (2/14)

TO:

Registration Section



## 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)

	limited liability company as	s it appears on the records of	the Florida D	)eparti	ment
		ssigned to this limited liabili	ty company is	S:	<u> </u>
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resig	ın is:		
4. I, Luis Duran	(name Park and	, hereby withdraw/resign as a of Person Resigning)			
MGR	ame oj Person Kesigning)				
	(Print Title)				
of this limited lia resignation in wr	-11	ne limited liability company l	has been notif	· 题21 APR 30	fmy
Signature of Di	ssociating Member or Resig	gning Manager		AM 9:	ET:
	\$25.00 (Required) \$30.00 (Optional)		LORIDA	9: 23	