

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GUZMAN & GUZMAN, P.A.

Account Number : 120080000090

; (305)670-1991

: (305)670-1993 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LAS TRES EME LLC

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## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it a	appears on the records of the Florida Department
of State is: LAS TRES EME LLC	
•	
2. This limited liability company was organized un	der the laws of:
FLORIDA	
3. The Florida document/registration number of th L11000095273	is limited liability company is:
SUSMAN MIGUEL ALBERTO	MGR
4. I, SUSMAN, MIGUEL ALBERTO  (Print Name of Person Resigning)	Print Title)
of this limited liability company and affirm the li- resignation in writing.	mited liability company has been notified of my
Signature of Resigning Member, Managing Men	nber or Manager
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