## 1/200004353

| (Re                                     | questor's Name)   |           |  |  |  |
|---|-------------------|-----------|--|--|--|
| (Address)                               |                   |           |  |  |  |
| (Address)                               |                   |           |  |  |  |
| (Cit                                    | y/State/Zip/Phone | o #)      |  |  |  |
| PICK-UP                                 | ☐ WAIT            | MAIL      |  |  |  |
| (Business Entity Name)                  |                   |           |  |  |  |
| (Document Number)                       |                   |           |  |  |  |
| Certified Copies                        | _ Certificates    | of Status |  |  |  |
| Special Instructions to Filing Officer: |                   |           |  |  |  |
|   |                   |           |  |  |  |
|   |                   |           |  |  |  |
|   |                   |           |  |  |  |

Office Use Only



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## **COVER LETTER**

|           | Registration Section Division of Corporations  |                                     |   |  |  |  |
|-----------|--|-------------------------------------|---|--|--|--|
| SUBJEC    | CT: A.M.C TRADING OF USA                       | A, LLC                              |   |  |  |  |
| ~ DOD.    |  | (Name of Limited Liability Company) |   |  |  |  |
| The encl  | osed member, resignation or diss               | sociation and fee(s)                | are submitted for filing.                       |  |  |  |
| Please re | eturn all correspondence concerni              | ng this matter to:                  |   |  |  |  |
| RAQUE     | EL DURAN                                       |                                     |   |  |  |  |
|           | (Contact Person)                               |                                     | -   |  |  |  |
| A.M.C     | TRADING OF USA , LLC                           |                                     |   |  |  |  |
|           | (Firm/Company)                                 |                                     | -   |  |  |  |
| 11251     | NW 20TH ST UNIT 106                            |                                     |   |  |  |  |
|           | (Address)                                      |                                     | -   |  |  |  |
| MIAMI,    | FL 33172                                       |                                     |   |  |  |  |
|           | (City/State and Zip Code)                      |                                     | -   |  |  |  |
| For furth | ner information concerning this m              | natter, please call:                |   |  |  |  |
| RAQUE     | EL DURAN                                       | 786<br>at (                         | 416-2053  |  |  |  |
|           | (Name of Contact Person)                       |                                     | & Daytime Telephone Number)                     |  |  |  |
|           | d please find a check made payab<br>Tiling Fee |                                     | epartment of State for:<br>Fee & Certified Copy |  |  |  |
|           | T/COURIER ADDRESS: tion Section                |                                     | MAILING ADDRESS: Registration Section           |  |  |  |
| Division  | of Corporations                                |                                     | Division of Corporations                        |  |  |  |
| Clifton I | Building<br>ecutive Center Circle              |                                     | P.O. Box 6327<br>Tallahassee, Florida 32314     |  |  |  |
|           | see, Florida 32301                             |                                     | Tananassee, 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)

|                                   | limited liability company as                                | • •                            | f the Florida Department |
|-----------------------------------|---|--------------------------------|--------------------------|
| 2. The Florida doc<br>L1200000435 | ument/registration number as<br>3                           | ssigned to this limited liabil | lity company is:         |
|                                   | ember/manager withdrew/resi EGAN  Tame of Person Resigning) |                                |                          |
| MANAGER                           | lame of Person Resigning)  (Print Title)                    |                                |                          |
|                                   | bility company and affirm the                               | e limited liability company    | has been notified of my  |
| Gescoio Signature of D            | feqor<br>issociating Member or Resign                       | ning Manager                   | 17<br>124 C              |
| Filing Fee:<br>Certified Copy:    | \$25.00 (Required)<br>\$30.00 (Optional)                    |                                | JUL-6 A                  |