

L12000021454

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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JAN 14 2013  
ATLANTA, GA

2014 JAN -6 PM 5:00

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** XL Management, LLC  
(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:

Javier Pineyro  
(Contact Person)

XL Management, LLC  
(Firm/Company)

P.O.Box # 260433  
(Address)

Miami, FL 33126  
(City/State and Zip Code)

For further information concerning this matter, please call:

Javier Pineyro at ( 214 ) 597-7548  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &  
Certified Copy

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

FILED  
2014 JAN -6 PM 5:31  
TALLAHASSEE, FL  
CLERK OF COURT



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: XL Management, LLC

2. The Florida document/registration number of this limited liability company is:  
L12000021454

3. The date this member withdrew or will withdraw is: 12/28/2013

4. I, Alejandro Martinez Gutierrez, hereby resign as a Managing Director  
*(Print Name of Person Resigning)* *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Alejandro Martinez Gutierrez  
Signature of Resigning or Dissociating Manager, Member

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