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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| (,, |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

| TO: | _ | stration Section sion of Corporations | | |
|--------|---------------------|--|----------------------|--|
| SUBJ | | JFST Enterprises LLC | | |
| | | (Name of L | imited Liability Cor | npany) |
| The er | nclosec | I member, resignation or disso | ociation and fee(s | s) are submitted for filing. |
| Please | e return | all correspondence concernir | ng this matter to: | |
| Moha | amed l | Latiff | | ^ ? |
| | | (Contact Person) | | - يىر |
| JFST | ⁻ Enter | prises LLC | | <u>2</u> |
| | | (Firm/Company) | _ | _ |
| 1943 | SE 22 | 2nd Drive | | |
| | | (Address) | | - |
| Home | esteac | f, FL. 33035 | | |
| | | (City/State and Zip Code) | | _ |
| For fu | rther in | nformation concerning this ma | itter, please call: | |
| Moha | amed l | _atiff | 305 | 219-4108 |
| **** | (N | ame of Contact Person) | _ \ | & Daytime Telephone Number) |
| | sed ple 5 Filing | ase find a check made payable Fee | | Department of State for: Fee & Certified Copy |
| | | OURIER ADDRESS: | | MAILING ADDRESS: |
| _ | | Section Corporations | | Registration Section Division of Corporations |
| | n Buile | <u>-</u> | | P.O. Box 6327 |
| 2661 I | Execut | ive Center Circle Florida 32301 | | Tallahassee, 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)

| L. The name of the | limited liability company as it | appears on the records of the | Florida Denartment |
|-----------------------------------|--|-----------------------------------|---------------------|
| | T Enterprises LLC | | 1 1 |
| 2. The Florida doc L1200005138 | ument/registration number assign | gned to this limited liability co | ompany is: |
| 3. The date this me | ember/manager withdrew/resign | ned or will withdraw/resign is: | 04/01/2018 |
| 4. l. Bibi Latiff | | , hereby withdraw/resign as | |
| MGR | | | |
| · | (Print Title) | | |
| resignation in wr | bility company and affirm the liting. iting. issociating Member or Resigning | | oeen notified of my |
| Filing Fee: Certified Copy: | \$25.00 (Required) \$30.00 (Optional) | | |