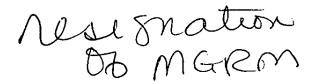
## L12000 124246

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
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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05/85/15--01002--005 \*\*25.00



DR 5////15

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Zuleta Enterprises, 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:			
Julio Zuleta (Contact Person)			
Zuleta Enterprises, UC			
[Ce38] Shenandoah Circle			
Fort Myers FL 33908 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Julio Zuleta at 239, 281-7556  (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 \$\sum \\$55 Filing Fee & Certified Copy			
STREET/COURIER ADDRESS: Registration Section  MAILING ADDRESS: Registration Section			

**Division of Corporations** 

Tallahassee, Florida 32314

P.O. Box 6327

CR2E079 (2/14)

Clifton Building

**Division of Corporations** 

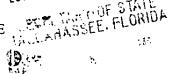
2661 Executive Center Circle

Tallahassee, Florida 32301



FILED
2815 HAY -5 PH 4:37

## 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)

		t appears on the records of the Florida Department
of State is:	Zuleta Ente	rprises, LLC
2. The Florida docu	ment/registration number ass	igned to this limited liability company is:
L1200	0124246	·
3. The date this me	mber/manager withdrew/resig	gned or will withdraw/resign is: $\frac{4/28/20}{5}$
4. I, Stac	cey Zuleta	, hereby withdraw/resign as a
Mana Mana	ame of Person Resigning)  Alr Member (Member (Member))	gRM)
	pility company and affirm the	limited liability company has been notified of my
	MANUL	Ha
Signature of Di	ssociating Member or Resign	ing Manager
Filing Fee:	\$25.00 (Required) 🗸	
Certified Copy:	\$30.00 (Optional)	