## L13000007001

(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



000287094000

06/17/16--01018--004 \*\*125.00

16 JUN 21 AH 7: 34

## COVER LETTER

то:	Registration Section Division of Corporations						
SUBJI	IMAA INIVECTMENIT II C						
5000	Name of Limited Liability Company						
	closed Statement of Revocation of Dissolution ted for filing.	for Florida Limit	ed Liability Company and fee(s) are				
Please	return all correspondence concerning this matt	er to:					
Carlos	J. Villanueva, Esq.						
	Contact Person		-				
Carlos	J. Villanuva P.A.						
	Firm/Company		_				
1820 1	N. Corporate lakes Blvd., Suite 306						
•	Address		_				
Westo	n, Florida 33326						
	City, State and Zip Code		_				
cvillar	oueva@unaley.com						
E-	mail address: (to be used for future annual repo	ort notification)	_				
For fu	rther information concerning this matter, please	call:					
Carlos	J. Villanueva, Esq.	at (	349-2006				
	Name of Contact Person	Area Code	Daytime Telephone Number				
	STREET 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, FL 32314				



## 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)

1. The name of the	The name of the limited liability company as it appears on the records of the Florida Department				
of State is:	A INVESTMENT, LLC		·		
2. The Florida doc	ument/registration number as	signed to this limited liabil	ity company is:		
L1300000700	1	•			
3. The date this me	ember/manager withdrew/resi	gned or will withdraw/resi	gn is:		
Ibiaat Salina	2				
(Print N	Same of Person Resigning)	, nereby withdraw/resi	igii as a		
Manager					
	(Print Title)				
of this limited lia resignation in wr	bility company and affirm the	e limited liability company	has been notified of my		
C			TO JUN 2		
Signature of D	issociating Member or Resign	ning Manager	21 1		
Filing Fee:	\$25.00 (Required)		7.		
Certified Copy:	\$30.00 (Optional)				