117000034624

| (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: |
| |
| |
| |





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02/24/14--01005--029 **25.00



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COVER LETTER

| TO: Registration Section Division of Corporations | | | | | |
|---|----------------------|--|--|--|--|
| SUBJECT: CorpPharma, LLC | ahilim. Cam | | | | |
| (Name of Limited Lia | totility Com | oany) | | | |
| The enclosed member, resignation or dissociation a | and fee(s) | are submitted for filing. | | | |
| Please return all correspondence concerning this m | atter to: | | | | |
| Cynthia Perez | | | | | |
| (Contact Person) | | | | | |
| CorpPharma, LLC | | | | | |
| | | | | | |
| (Firm/Company) | | | | | |
| 704 SW 68 Ave | | | | | |
| (Address) | | | | | |
| Miami, FL 33144 (City/State and Zip Code) | | | | | |
| | | · | | | |
| For further information concerning this matter, ple | ase call: | Company of the second s | | | |
| Cynthia Perez | 305 | 5223343 | | | |
| (Name of Contact Person) (A | rea Code | & Daytime Telephone Number). | | | |
| Enclosed please find a check made payable to the F \$25 Filing Fee | | epartment of State for: so co | | | |
| STREET/COURIER ADDRESS: | | MAILING ADDRESS: 1.37 1 1 1 1 1 1 5 5 | | | |
| Registration Section | Registration Section | | | | |
| Division of Corporations | | Division of Corporations | | | |
| Clifton Building | | P.O. Box 6327 | | | |
| 2661 Executive Center Circle | , | Tallahassee, Florida:32314 | | | |
| Tallahassee, Florida 32301 | | | | | |

CR2E079 (12/13)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

| | limited liability company as it app pPharma, LLC | ears on the record | ls of the Flor | ida Depar | tment |
|--|---|---------------------|----------------|--|-----------------------|
| 2. The Florida doc | ument/registration number of this l | imited liability co | mpany is: | | |
| 3. The date this me | mber withdrew or will withdraw is | : February 14 | , 2014 | <u> </u> | |
| _{4. I.} Bladimir Sa | nchez | hereby resign as a | MGR 🖘 | · | . 7 |
| , | ame of Person Resigning) | | (Pri | nt Title) | . |
| of this limited lia resignation in wr | bility company and affirm the limiting. | ed liability comp | any hasibeen | notified o | of my |
| Signature of Ri | signing or Dissociating Manager, | | | And the second s | |
| • | \$25.00 (Required) | , | c | | gara. Tama Tama |
| Certified Copy: | \$30.00 (Optional) | į. | 1 1 1 1 1 1 1 | | 1. |