

L130000 81387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

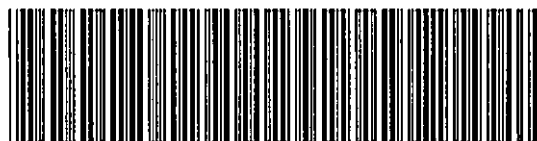
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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## COVER LETTER

20 FEB 25 PM 1:16  
Filing Section  
Division of Corporations  
Tallahassee, FL 32303

TO: Registration Section  
Division of Corporations

SUBJECT: AB Future Investment 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:

Ana M Toledo  
\_\_\_\_\_  
(Contact Person)

Ana M Toledo CPA  
\_\_\_\_\_  
(Firm Company)

9901 SW 5th Street Circle  
\_\_\_\_\_  
(Address)

Miami, FL 33174  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Ana M Toledo  
\_\_\_\_\_  
(Name of Contact Person)

305  
at (\_\_\_\_\_) \_\_\_\_\_  
(Area Code & Daytime Telephone Number)

989-8480

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

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

Mailing Address:

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

Street Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



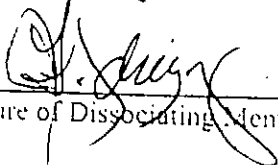
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

20 FEB 25 PM 1:15

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**  
(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: AB Future Investment LLC
2. The Florida document/registration number assigned to this limited liability company is: 113000081387
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 2/14/2020
4. I, Jorge Rodriguez, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
MGRM  
*(Print Title)*

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

  
\_\_\_\_\_  
Signature of Dissociating Member or Resigning Manager

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