113000093320

(Requestor's Name)				
(Address)				
(Address)				
(Cil	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	usiness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
		:		

Office Use Only



200277770672

10/12/15--01008---027 **25.00

2015 OCT 12 P 12: 14
SECRETARY OF STATE
AND ASSEE OF STATE

OCT/123 2015

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Travie Enterprises, LLC			_
(Name of Limite	d Liability Con	npany)	
The enclosed member, resignation or dissociat	ion and fee(s) are submitted for filing.	
Please return all correspondence concerning th	is matter to:		
Raul Travieso			
(Contact Person)		_	
Travie Enterprises, LLC			
(Firm/Company)	<u> </u>	_	
13128 SW 3rd Street			
(Address)		SE SE	3
Miami, FL, 33184		SECRETARY ALLAHASSE	; > - -
(City/State and Zip Code)		SSE VXX	
For further information concerning this matter	, please call:		i i
Raul Travieso	786 at (251-3639 GRAIE 5	? -
(Name of Contact Person)	(Area Code	& Daytime Telephone Number)	-
Enclosed please find a check made payable to \$25 Filing Fee		Department of State for: 3 Fee & Certified Copy	
STREET/COURIER ADDRESS:		MAILING ADDRESS:	
Registration Section		Registration Section	
Division of Corporations Clifton Building		Division of Corporations P.O. Box 6327	
2661 Executive Center Circle		Tallahassee, Florida 32314	
Tallahassee, Florida 32301		rananassee, r ionida 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)

1. The name of the	limited liability company as	it appears on the records	of the Florida Department		
of State is:	ie Enterprises, LLC		·		
2. The Florida doct	ument/registration number as	ssigned to this limited lia	bility company is:		
3. The date this me	mber/manager withdrew/res	igned or will withdraw/re	10/4/2015 esign is:		
4. I, Damaris Travieso (Print Name of Person Resigning)		hereby withdraw/r	hereby withdraw/resign as a		
(Print N	lame of Person Resigning)	,, w.a.a.a.,, .	vo.8.1 a.o a		
Manager					
	(Print Title)				
resignation in wr	was		2015 OCT SECRETA FALLAHAS		
	sso ciating M ember or Resig	ning Manager	TO TO		
	\$25.00 (Required)		D: I		
Certified Copy:	\$30.00 (Optional)		``≠``		