## L13000115168

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(City/State/Zip/Phone #)				
(Business Entity Name)				
(Document Number)				
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Special Instructions to Filing Officer:				

Office Use Only



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C. GOLDEN MAY 1 6 2019

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: MCI HOLDINGS LLC	
(Name of Limited Liability Com	pany)
The enclosed member, resignation or dissociation and fee(s)	are submitted for filing.
Please return all correspondence concerning this matter to:	
Christian Giraldo	
(Contact Person)	
Century 21 Capital Brokers	
(Firm/Company)	
20295 NE 29th PL Suite 100A	
(Address)	
Aventura, FI 33180	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Chritsian Giraldo 786	683 6400
(Name of Contact Person) (Area Code	& Daytime Telephone Number)
Englosed please find a check made payable to the Florida De \$25 Filing Fee \$55 Filing	epartment of State for: Fee & Certified Copy
Registration Section	MAILING ADDRESS: Registration Section
·	Division of Corporations P.O. Box 6327
	Tallahassee, Florida 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)

	limited liability company as HOLDINGS LLC	; it appears on the reco	rds of the Florida Department
2. The Florida doc L1300011516	ument/registration number as	ssigned to this limited	liability company is:
. , Giraldo, Chri	ember/manager withdrew/res stian S	signed or will withdraw	
MGR	(Print Title) bility company and affirm th	ne limited liability com	pany has been notified of my
Filing Fee:	s25.00 (Required) S30.00 (Optional)	ning Manager .	2019 HAY -3 P