Florida Department of State

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305-810-2500 305-810-2460

FAX

TO

FAX:

18506176383

FROM

NAME:

Maria Lopez Martinez

RECIPIENT: FLORIDA DEPARTMENT OF STATE - FLORIDA LIMITED LIABILITY CO.

Good afternoon

Please find attached DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA LIMITED LIABILITY COMPANY for BOZETTI LTD., LLC.

Please contact me at (305) 536 - 2705 with any questions.

Thank you so much,

Maria Laura Lopez (305) 536 - 2705 Hunton & Williams LLP

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COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Bozetti Ltd., 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:	:				
Uriel Mendieta					
(Contact Person)					
HUNTON & WILLIAMS LLP					
(Firm/Company)	_				
1111 BRICKELL AVE, SUITE 2500					
(Address)					
Miami, Florida 33131					
(City/State and Zip Code)					
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Uriel Mendieta 305	536-2729				
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Enclosed please find a check made payable to the Florida I \$25 Filing Fee \$55 Filin	Department of State for: g Fee & Certified Copy				
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CR2E079 (2/14)					

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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Plorida Statutes)

	1. The name of the of State is:	limited liability company as tti Ltd., LLC	it appears on the records o	f the Florid	а Дера	rtment	
and the second	2. The Florida docu L13000129583	ment/registration number as	signed to this limited liabil	lity compan	y is:	٠,., ٠	
	3. The date this member/manager withdrew/resigned or will withdraw/resign is: 2/23/15						
	Investment S	pain One Quartz, S.L.	, hereby withdraw/resign as a				
	of this limited liab resignation in wri	Print Title) sility company and affirm the ting. ssociating Member or Resign		has been n	otified	of my	
	Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)					
				SECRE	2815 JU		