L13000130555

(Re	questor's Name			
(Ad	dress)			
(Add	dress)			
(Cit	y/State/Zip/Phor	ne #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				
		112/21		





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08/23/21--01014--007 **25.00

021 AUG 23 PH I= 04 SECRETARY OF STATE

COVER LETTER'

LA	MIRANDA LLC		
SUBJECT:			
	(Name	of Limited Liabilit	y Company)
The enclosed me	ember, resignation or d	issociation and	fee(s) are submitted for filing.
Please return all	correspondence conce	rning this matte	r to:
Walter Wainstein			
——————————————————————————————————————	(Contact Person)		
Walter Wainstein, I	PA		
	(Firm/Company)		
7401 Palomino Dr.	Apt 117		
·	(Address)		
Hollywood, FL 330	24		
	(City/State and Zip Code)		
or further infor	mation concerning this	matter, please of	eall:
Walter Wainstein		786 at (399-0460
(Name	of Contact Person)		Code & Daytime Telephone Numb

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



FILED

2021 AUG 23 PM 4: 04

SECRETARY OF STATE TALLAHASSEE, FL

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)

	e limited liability company as it app	ears on the records of the Florida Department
2. The Florida doc	cument/registration number assigned	to this limited liability company is:
3. The date this me	ember/manager withdrew/resigned	or will withdraw/resign is:
111.1.TED 111.1.T		
MANAGER	nume of tensor non-growng,	
	(Print Title)	
resignation in w	oriting.	ted liability company has been notified of my
Signature of E	oissociating Member or Resigning N	Manager
	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	