13000	
(Requestor's Name) (Address)	
(Address)	700278508697
(City/State/Zip/Phone #)	
(Business Entity Name)	11/02/1501005030 **25.00
(Document Number)	
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	AH 8:30 E.FLORIDA
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(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:

(Contact Person)

AFFORDABLE LEGAL & ACCOUNTING SERVICES

(Firm/Company)

10300 SUNSET DRIVE STE 140

(Address)

MIAMI, FL 33173

(City/State and Zip Code)

For further information concerning this matter, please call:

Alejandra Cartular

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

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

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STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 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)

- 1. The name of the limited liability company as it appears on the records of the Florida Department of State is: _____
- 2. The Florida document/registration number assigned to this limited liability company is: L13000151708

	······	بي ≦ 10/23 /2 01	5 5	
3. The date this member/manager withdrew/resigned	ed or will withdraw/resign is: _		2	-
4. I, JAIME CRISTIAN SASSO ZAVALA	_, hereby withdraw/resign as a	ETAR	- YO	تىلايچەل.
(Print Name of Person Resigning)		SE X	\sim	t Marine S
MANGAGER		لد الد 0 نئ	AM	TT:
(Print Title)		STAT	ෂ: යු	\Box
of this limited liability company and affirm the li	mitad liability company has be		lo.fm∵	• /

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

fun Cultur Susso Zwald Signature of Dissociating Member or Resigning Manager

Filing Fee: Certified Copy:

\$25.00 (Required) \$30.00 (Optional)