

#L14000003609

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
FEB 26 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: M.E.S. INVESTMENTS 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:

SOLA, MARIANA E
(Contact Person)

(Firm/Company)

1860 NW 55 STREET
(Address)

MIAMI, FL 33147
(City/State and Zip Code)

For further information concerning this matter, please call:

SOLA, MARIANA E at (786) 291-3535
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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

☒ \$25 Filing Fee

☐ \$55 Filing Fee &
Certified Copy

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



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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2014 FEB 24 PM 12:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: M.E.S. INVESTMENTS LLC

2. The Florida document/registration number of this limited liability company is:
L14000003609

3. The date this member withdrew or will withdraw is: 02-15-2014

4. I, GONZALEZ, KARELIA, hereby resign as a MGR
(Print Name of Person Resigning) *(Print Title)*

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

K. Gonzalez
Signature of Resigning or Dissociating Manager, Member

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)