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CR2E079 (2/14)

Registration Section

Division of Corporations Vida Sales Force, LLC SUBJECT: (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: Javier Aldrich (Contact Person) (Firm/Company) 300 S Biscayne Blvd. Suite T1402 (Address) Miami, FL 33131 (City/State and Zip Code) For further information concerning this matter, please call: Javier Aldrich (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: **MAILING ADDRESS:** Registration Section **Registration Section Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301



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 Sales Force, LLC	it appears on the records of the	he Florida Department
2. The Florida doct	-	ssigned to this limited liability	company is:
louier Aldriel	_	igned or will withdraw/resign, hereby withdraw/resign	,
	(Print Title)		
of this limited lia resignation in wr		ne limited liability company ha	as been notified of my
1/6	Plak		SECR
Signature of Di	ssociating Member or Resign	ning Manager	FILI ULL-7 ETARY HASSEI
_	\$25.00 (Required) \$30.00 (Optional)		CHOSCHELL STATISHELL STATISHELL CHOSCHELL CHOS