LIH 000019923

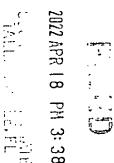
(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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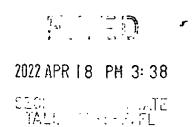
TO: Registration Section Division of Corporations

SUBJECT: Francisco Janel !	a uc.
(Navie of Limited Lie	ability Company)
The enclosed member, resignation or dissociation	and fee(s) are submitted for filing.
Please return all correspondence concerning this n	natter to:
Jonny Koo (Contact Person)	
(Contact Person)	
(Firm/Company)	
6883 Horida Drive	
Palle Worth. Fr. 33462	
(City/State and Zip Code)	
For further information concerning this matter, ple	ease call:
Jenny Koo at (_	561, 907 9899
(Name of Contact Person) (A	area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the ☐ \$25 Filing Fee	Florida Department of State for: 555 Filing Fee & Certified Copy
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







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: Francisco Javies Koo UC.
2. The Florida document/registration number assigned to this limited liability company is:
#L14000019923
3. The date this member/manager withdrew/resigned or will withdraw/resign is: April. 01. 2022
4. I. Davier Educido Murata hereby withdraw/resign as a (Print Name of Person Resigning)
Member . (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
Javier Educado Munta
Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)