

L14 000 0 235 24

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

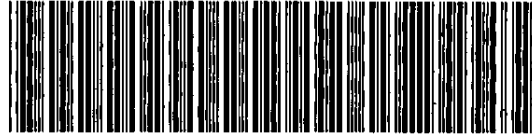
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400286041934

06/01/16--01028--008 \*\*25.00

RECEIVED  
16 JUN -1 AM 7:54  
FILING OFFICE  
TALLAHASSEE, FLORIDA

JUN 02 2016  
J SHIVERS

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Bocado 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:

Daniel Detoni  
(Contact Person)

Bocado LLC  
(Firm/Company)

350 S SOUTH MIAMI AVE  
(Address)

MIAMI, FL, 33130  
(City/State and Zip Code)

For further information concerning this matter, please call:

Daniel Detoni at ( 305 ) 2139590  
(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

**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: Bocado LLC

2. The Florida document/registration number assigned to this limited liability company is:

L14000023524

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 05/24/2016

4. I, ROGERIO ROCHA, hereby withdraw/resign as a  
(Print Name of Person Resigning)

MANAGER, AUTHORIZED MEMBER  
(Print Title)

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

Rogelio Rocha

Signature of Dissociating Member or Resigning Manager

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

RECEIVED  
JUN - 1 AM 7:54  
DIVISION OF CORPORATIONS  
FLORIDA