## LIUDOUN

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Cir	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Nai	me)
(Do	ocument Number)	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

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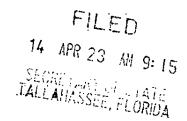
R. WHILE

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: ZUVA LLC.	ed Liability Company)	
(Name of Limite	ed Liability Company)	
The enclosed member, resignation or dissociat	tion and fee(s) are submitted for filing.	
Please return all correspondence concerning th	ais matter to:	
Li Liam Vargas (Contact Person)		
(Contact Person)		
(Firm/Company)		
834 TWIN LAKES DRIVE (Address)	· · · · · · · · · · · · · · · · · · ·	
Corol Springs, FL 33071 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Liliam Vargas (Name of Contact Person)	at (186) 328 - 0682 (Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to \$25 Filing Fee	the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Cliffon 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: 20	DVA LLC
2. The Florida docu	ment/registration number assigned to this limited liability company is:
L140000	43744
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: 41814
4. 1, SARA ZU (Print N	, hereby withdraw/resign as a game of Person Resigning)
Member	(Print Title)
	oility company and affirm the limited liability company has been notified of my
Sara,	Zuluaga ssociating Member or Resigning Manager
Signature of Di	ssociating Member or Resigning Manager
	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)