L140000043744

(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	· - ···································
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Ві	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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TOTAL 23 IN DE OF

Red mg/m 104,30,14

COVER LETTER

TO: Registration Section Division of Corporations	
Division of Corporations	
SURJECT: 7:M/A ((C	
SUBJECT: ZUVA LUC (Name of Limited Liability Con	mpany)
The analoged member regionation or dissociation and free) on submitted for filing
The enclosed member, resignation or dissociation and fee(s	s) are subfinited for fitting.
Please return all correspondence concerning this matter to:	
Lilian Varons	
Liliam Vargas (Contact Person)	_
	_
(Firm/Company)	_
834 TWIN LAKES DRIVE (Address)	_
(Address)	
and 6 a 22 a 22 a 22 a 22 a 24	
coral Springs, FL 33071 (City/State and Zip Code)	_
For further information concerning this matter, please call:	
1.)	0.0
Liliam Vargas at (786 (Name of Contact Person) (Area Code	8 Daytima Talanhana Number
(Marie of Contact Ferson) (Area Code	e & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida I	
■ \$25 Filing Fee ■ \$55 Filing	g Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Cliffon Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	

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	VA LLC
2. The Florida docu	ment/registration number assigned to this limited liability company is:
L140000	43744
3. The date this mer	mber/manager withdrew/resigned or will withdraw/resign is: 4\18\14
	. ZUluaga , hereby withdraw/resign as a me of Person Resigning)
Manage	Print Title)
of this limited liab resignation in writ	ility company and affirm the limited liability company has been notified of my ting.
Haria C.	
Signature of Dis	ssociating Member or Resigning Manager
_	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)