

L14000053138

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : MF CORPORATE SERVICES INTL
Account Number : 120110000034
Phone : (305) 856-6121
Fax Number : (305) 856-6122

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Dantini@bellsouth.net

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FLORILINDA LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC Resign.

m/m

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5/7/14 DC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FLORILINDA 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:

Olga Santini
(Contact Person)

MF Corporate Services International
(Firm/Company)

1541 Brickell Ave, Suite 1806
(Address)

Miami, FL 33129
(City/State and Zip Code)

For further information concerning this matter, please call:

Olga Santini at 305 856-6121
(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: FLORILINDA LLC

2. The Florida document/registration number assigned to this limited liability company is:
L14000053138

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 05/06/2014

4. I, Olga Santini, hereby withdraw/resign as a
(Print Name of Person Resigning)
Manager
(Print Title)

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

Olga Santini
Signature of Dissociating Member or Resigning Manager

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

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