

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #	)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name)	
(Ox	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only



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PERSONAL CONTESTIONS

K. SALY JAN 22 2018

### **COVER LETTER**

Division of Corporations
SUBJECT: Worldwide Egypment Export LLC
(warne of Limmed Liability Company)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Gabriel Vargas.
Worldwick Export (Firm/Company)
8032 Sothe 784 Street
Riversiale and Zip Code)
For further information concerning this matter, please call:
GAbriel Varga5 at (786) 9301593.  (Name of Contact-Person) (Area Code & Daytime Telephone Number)
(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:

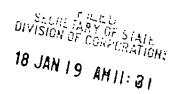
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

#### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

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:	Norldwide Equipment Export, LLC.
2. The Florida doc	ument/registration number assigned to this limited liability company is:
	00053972
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is: $\frac{1108/17}{1}$
4. I. a Macin	Jose Hercucko. hereby withdraw/resign as a lange of Person Resigning)
A	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Signature of Di	ssociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)