

**Florida Department of State**  
**Division of Corporations**  
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To: Division of Corporations  
 Fax Number : (850) 617-6393

From: Account Name : CORP USA  
 Account Number : 072450003255  
 Phone : (305) 634-3694  
 Fax Number : (786) 409-5946

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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:** \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**CORNYELLOW201 (USA), LLC**

Certificate of Status	0
Certified Copy	1
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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CORNYELLOW201 (USA), 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:

ERNESTO SANCHEZ ESQ.

(Contact Person)

ERNESTO SANCHEZ P.A.

(Firm/Company)

1313 PONCE DE LEON SUITE #301

(Address)

CORAL GABLES, FL 33146

(City/State and Zip Code)

For further information concerning this matter, please call:

ERNESTO SANCHEZ PA at 305 441-2040  
(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

CR2ED79 (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: CORNYELLOW201 (USA), LLC.

2. The Florida document/registration number assigned to this limited liability company is:  
L14000091811

3. The date this member/manager withdrew/resigned or will withdraw/resign is: JULY 14, 2014

4. I, RICARDO PELAEZ ASCANIO, 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.

[Signature]  
Signature of Dissociating Member or Resigning Manager

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

CR2E079 (2/14)

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