

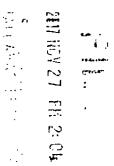
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Special Instructions to Fili	ng Officer:	
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1. HARRIS

COVER LETTER

TO:	Registration Section Division of Corporations					
	or corporation.					
SUBJ	JECT: 350'S capital LLC					
	(Name of Lir	(Name of Limited Liability Company)				
The en	nclosed member, resignation or dissoc	iation and fee((s) are submitted for filing.			
Please	e return all correspondence concerning	this matter to	:			
Carlo	os Camacho					
	(Contact Person)		_			
350'S	S Capital LLC					
	(Firm/Company)		_			
1100	Duncan cir, apt # 102					
	(Address)		_			
Palm	beach Gardens FL 33418					
	(City/State and Zip Code)		_			
For fu	arther information concerning this mate	ter, please call	:			
Carlo	os Camacho	561	3897924			
	(Name of Contact Person)	_	e & Daytime Telephone Number)			
	sed please find a check made payable 5 Filing Fee		Department of State for: g Fee & Certified Copy			
	EET/COURIER ADDRESS:		MAILING ADDRESS:			
_	tration Section fon of Corporations		Registration Section Division of Corporations			
	n Building		P.O. Box 6327			
	Executive Center Circle		Tallahassee, Florida 32314			
Tallah	assee, 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)

I. The name of the	limited liability company as it ar	opears on the records of the Florida Depa	riment
	S Capital LLC		·
2. The Florida doci	ument/registration number assign	sed to this limited liability company is:	
L 1500	00041269		
		d or will withdraw/resign is:11/17/2017	,
4. 1. Maria C. Och	noa Vame of Person Resigning)	hereby withdraw/resign as a	
manager	(Print Title)		
of this limited lia resignation in wr		nited liability company has been notified	of my
	eden Duc-		
Signature of Di	issociating Member or Resigning	Manager	
-	\$25.00 (Required) \$30.00 (Optional)	·- · · ·	<u> </u>
• •	* • ·		