115000046792

(Requestor's Na	me)
(Address)	
,	
(Address)	
(City/State/Zip/P	hone #)
, , , , ,	,
PICK-UP WAIT	MAIL
(Business Entity	Name)
(Document Num	har)
(Docament Nam	.beij
Certified Copies Certific	cates of Status
Special Instructions to Filing Officer	

Office Use Only



700307824717

01/23/18--01002--022 **25.00

RECEIVED

JAN 22 2018

DIVISION OF TUN.

K SALY JAN 24 2018

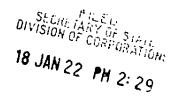
COVER LETTER

TO: Registration Section

CR2E079 (2/14)

Division of Corporations
SUBJECT: SECURED FOUNDATION LL (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:
DIEGO MATA (Contact Person)
(Firm/Company) 4410 SW 82ND Way (Address)
Davie FL 33328 (City/State and Zip Code)
For further information concerning this matter, please call:
Diego Mata at (954) 336-2670 (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 \$ 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)

	limited liability company as it appears on the records of the Florida Department
of State is:	SECURED FOUNDATION LLC
2. The Florida doc	ument/registration number assigned to this limited liability company is:
L150	00046792
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is: $1/10/2018$
4. I, <u>DIEG</u>	hereby withdraw/resign as a lame of Person Resigning)
	AND MEMBER (Prini Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Dieza	WY -
Signature of D	issociating Member or Resigning Manager
Filing Fee:	
Certified Conv	\$30.00 (Optional)