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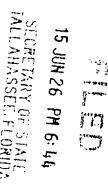
| (Requestor's Name) | | | |
|-------------------------------------|---------------------|--|--|
| | | | |
| (Address) | | | |
| | | | |
| (Address) | | | |
| | | | |
| (City/State/Zi | p/Phone #) | | |
| PICK-UP W | AIT MAIL | | |
| | | | |
| (Business En | tity Name) | | |
| | | | |
| (Document Number) | | | |
| | | | |
| Certified Copies Cer | tificates of Status | | |
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| Special Instructions to Filing Offi | cer: | | |
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Office Use Only



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JUN 29 2015 J SHIVERS

COVER LETTER

TO: Registration Section

CR2E079 (2/14)

| Divis | ion of Corporations | | | |
|---------------------------------------|--------------------------------------|----------------------|---|--|
| SUBJECT: | International Business & | Travel Opportur | nities LLC | |
| | (Name of Limited Liability Company) | | | |
| The enclosed | I member, resignation or diss | sociation and fee(s | s) are submitted for filing. | |
| Please return | all correspondence concern | ing this matter to: | | |
| W Patrick N | Murphy | | | |
| | (Contact Person) | | | |
| Internationa | al Business & Travel Oppo | rtunities LLC | | |
| | (Firm/Company) | | _ | |
| 4737 N Oce | ean Blvd., PMB 137 | | | |
| | (Address) | | | |
| Lauderdale | by the Sea, FL 33308 | | | |
| · · · · · · · · · · · · · · · · · · · | (City/State and Zip Code) | | _ | |
| For further in | nformation concerning this m | natter, please call: | | |
| W Patrick N | Murphy | 954 at (| 654-3786 | |
| (N | ame of Contact Person) | | & Daytime Telephone Number) | |
| Enclosed ple \$25 Filing | ase find a check made payab ; Fee | | Department of State for: g Fee & Certified Copy | |
| | OURIER ADDRESS: | | MAILING ADDRESS: | |
| Registration Division of C | | | Registration Section Division of Corporations | |
| Clifton Build | • | | P.O. Box 6327 | |
| 2661 Execut | ive Center Circle Florida 32301 | | 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)

| | e limited liability company | as it appears on the records of the Flo avel Opportunities LLC | orida Department |
|-------------------------------------|---|--|--------------------------------------|
| 2. The Florida doc L1500007088 | • | r assigned to this limited liability com | pany is: |
| 4. I, Ana G Rios (Print) Ana G Rios | Name of Person Resigning) AMBR (Prini Tille) ability company and affirm | resigned or will withdraw/resign is: 6, hereby withdraw/resign as a, the limited liability company has bee | 15 JUN 26 PH 6544 SECRETARY OF STITE |
| Signature of D | issociating Member or Res | signing Manager | |
| Filing Fee: Certified Copy: | \$25.00 (Required) \$30.00 (Optional) | | |