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TO:



COVER LETTER

Registration Section **Division of Corporations** V & M INVESTORS GROUP, 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: DIEGO FIGUEROA (Contact Person) E & F LATIN GROUP LLC (Firm/Company) 1820 N CORPORATE LAKES BLVD SUITE 109 (Address) WESTON FL 33326 (City/State and Zip Code) For further information concerning this matter, please call: DIEGO FIGUEROA (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy ₩ \$25 Filing Fee MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Cliffon Building

Tallahassee, Florida 32314

CR2E079 (2714)

2661 Executive Center Circle Tallahassee, 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)

1. The name of the limited liability company a of State is: V & M INVESTORS GROUP	as it appears on the records of the Florida Department P, LLC
2. The Florida document/registration number a L15000085588	assigned to this limited liability company is:
3. The date this member/manager withdrew/re	2/20/2017
(Prim Name of Person Resigning)	, hereby withdraw/resign as a
PVTS MARTIN, JOSE C (Print Title)	si
resignation in writing.	the limited liability company has been notified of my
Signature of Dissociating Member or Resi	gning Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	







