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SECRETARY OF STATE

MARRICE

## **COVER LETTER**

	istration Section sion of Corporations					
SUBJECT:	JJF INVESTMENTS, LLC					
		ited Liability Con	npany)			
The enclose	d member, resignation or dissoci	ation and fee(s	) are submitted for filing.			
Please retur	n all correspondence concerning	this matter to:				
JORGE F	ERNANDEZ					
	(Contact Person)		<u>.</u>			
	(Firm/Company)		-			
3663 SW	8 ST, 3RD FLOOR					
	(Address)		_			
MIAMI, FL	. 33135					
	(City/State and Zip Code)	······································	_	JAT 38	2015	
For further	information concerning this matt	er, please call:		CRE TA	5 AUG 27	
JORGE F	ERNANDEZ	305	525-1439	RY O		m
	Name of Contact Person)	(Area Code	& Daytime Telephone Num	ibet)	A =	U
Enclosed pl	lease find a check made payable t ng Fec	o the Florida L	Department of State for: g Fee & Certified Copy	TATE JRIDA	A II: 45	
STREET/C	COURIER ADDRESS:		MAILING ADDRESS:			

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

CR2E079 (2/14)

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)

	the limited liability company as	• •	Florida Departmen	nt .·
2. The Florida d	ocument/registration number ass	signed to this limited liability c	ompany is:	
	member/manager withdrew/resi	gned or will withdraw/resign is	7/27/15 s:	
4. 1, <u>JOSE FEI</u> (Pri	RNANDEZ  nt Name of Person Resigning)	, hereby withdraw/resign a	as a	
MANAGEF	₹			
	(Print Title)  liability company and affirm the writing.  m. Fluan do  Dissociating Member or Resign		2016 AUG 27 A 11: 45 SEGRETARY OF STATE TALLENHASSEE, FLORIDA	
Filing Fee	\$25.00 (Required)		- 01	

Certified Copy: \$30.00 (Optional)