

Division of Corporations Electronic Filing Cover Sheet

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To:

From: Paola Sanchez

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : GUZMAN & GUZMAN, P.A.

Account Number : 120080000090 : (305)670-1991 ; (305)670-1993 Pax Number

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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)

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1. The name of the	e limited liability company a	s it appears on the records of	the Florida	i Departmer	าเ
of State is: TAI	MARISCOS LLC				ة إحساء
	cument/registration number a	assigned to this limited liabil	ity compan	2: 09	
3. The date this me	ember/manager withdrew/re	signed or will withdraw/resig	gn is: MAY	21, 2019	
~ ^ ~ L441		, hereby withdraw/resi			
(Print i	Name of Person Resigning)				
MGR					
	(Print Title)				
of this limited lize resignation in w		he limited liability company	has been no	otified of my	у
Signature of D	ssociating Member or Resig	gning Manager			
Filing Fee:	\$25.00 (Required)				
Certified Copy:	\$30.00 (Optional)				