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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

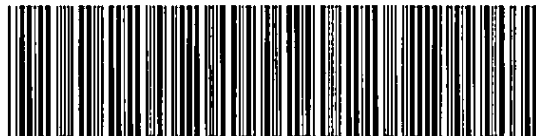
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dileyla Angel Investments LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Amendment or Cancellation of Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maximo Rodriguez
Name of Person

Dileyla Angel Investments LLC
Firm/Company

9091 NW 27 ave
Address

Miami, FL 33147
City/State and Zip Code

maxthermosales@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephanie Rodriguez at (305) 691-3533
Name of Person Area Code Daytime Telephone Number

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

AMENDMENT OR CANCELLATION OF STATEMENT OF AUTHORITY

Pursuant to section 605.0302(2), Florida Statutes, this limited liability company submits the following:

FIRST: The name of the limited liability company is: Dikely Angel
Investments LLC

SECOND: The Florida Document number of the limited liability company is: L15000169125

THIRD: The street address of the limited liability company's principal office is:

9091 NW 27 Ave
Miami, FL 33147

The mailing address of the limited liability company's principal office is:


FOURTH: The date the statement of authority became effective is: 4/16/18

FIFTH: The statement of authority is cancelled.

OR

The amendment to the statement of authority is

Is granted to Stephanie Rodriguez to conduct all business
e-transactions on behalf of the company including transfers of
real property and bind company for same


Signature of authorized representative

Maximo Rodriguez
Typed or printed name of signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)