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## **COVER LETTER**

Division of Corporations  ALL ONE PARTY, LLC.  SUBJECT:  (Name of Limited Liability Company)  The enclosed member, resignation or dissociation and fee(s) are submitted to the Please return all correspondence concerning this matter to:  GUIDO J. GUERRA  (Contact Person)  ALL ONE PARTY, LLC.  (Firm/Company)  4005 NW 114TH AVE. SUITE 24	
(Name of Limited Liability Company)  The enclosed member, resignation or dissociation and fee(s) are submitted to Please return all correspondence concerning this matter to:  GUIDO J. GUERRA  (Contact Person)  ALL ONE PARTY, LLC.  (Firm/Company)	
The enclosed member, resignation or dissociation and fee(s) are submitted to Please return all correspondence concerning this matter to:  GUIDO J. GUERRA  (Contact Person)  ALL ONE PARTY, LLC.  (Firm/Company)	
Please return all correspondence concerning this matter to:  GUIDO J. GUERRA  (Contact Person)  ALL ONE PARTY, LLC.  (Firm/Company)	
GUIDO J. GUERRA  (Contact Person)  ALL ONE PARTY, LLC.  (Firm/Company)	for filing.
(Contact Person)  ALL ONE PARTY, LLC.  (Firm/Company)	
ALL ONE PARTY, LLC.  (Firm/Company)	
(Firm/Company)	
4005 NW 114TH AVE. SUITE 24	
(Address)	
DORAL, FL 33178	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
GUIDO J. GUERRA 305 718-8813	
(Name of Contact Person) (Area Code & Daytime Telep	phone Number)
Enclosed please find a check made payable to the Florida Department of Star \$25 Filing Fee \$ Certified	
STREET/COURIER ADDRESS:  Registration Section  Division of Corporations  Clifton Building  P.O. Box 6327  2661 Executive Center Circle  Tallahassee, Florida 32301	ection

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)

ALL	limited liability company as ONE PARTY, LLC.	s it appears on the records of the Flo	rida Department	
2. The Florida doct L1500020229	•	ssigned to this limited liability comp	oany is:	
			9/22/2016	
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resign is:		
MARIANA RO	ū			
4. I.	SBINGULZ	, hereby withdraw/resign as a		
(Print N	ame of Person Resigning)	, hereby withdraw/resign as a		
MANAGER				
	(Print Title)			
of this limited lia resignation in wr		ne limited liability company has been	n notified of my	
Ma	idehodys		16 DEC	1
Signature of Di	ssociating Member of Resig	ning Manager	岩 1	Mari Parties
J ——		<u> </u>	Ge 2	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		2 PM 3: 2	
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