L15000210207

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SECRETARY OF STATE

COVER LETTER

	egistration Section bivision of Corporations			
SUBJEC	Murai Wald Biondo & Moreno PLLC			
50.7012	(Name of Limited Liability Company)			
The encl	osed member, resignation or dissoci	ation and fee(s) are submitted for filing.		
Please re	turn all correspondence concerning	this matter to:		
Jennifer C	Grobelny			
-	(Contact Person)			
Biondo	o& Biondo P.A.			
	(Firm/Company)			
135 San L	Orenzo Avenue, Suite 710			
	(Address)			
Coral Gab	les, FL 33146			
	(City/State and Zip Code)			
For furth	er information concerning this matte	er, please call:		
Jennifer G	robelny	305 444-0101 at ()		
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
	I please find a check made payable t iling Fee	the Florida Department of State for: S55 Filing Fee & Certified Copy		
R D P	Tailing Address: Legistration Section Division of Corporations LO. Box 6327 Fallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		



FILED

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SECNETARY OF STATE TALLAHASSEE, FL

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)

	e limited liability company as it a	ppears on the records of the Florida Department
2. The Florida doc	ument/registration number assign	ned to this limited liability company is:
L15000210207		
3. The date this me	ember/manager withdrew/resigno	ed or will withdraw/resign is: December 31, 2021
4. I, Biondo & Biondo P.A. , he		_, hereby withdraw/resign as a
(Print)	Name of Person Resigning)	- ,
Member		
	(Print Title)	
of this limited lia resignation in wr	The state of the s	mited liability company has been notified of my
Signature of D	1 10 100 lor Browning	Manager PA.
	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	