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## **COVER LETTER**

COVER LETTER					
TO: Registration Section Division of Corporations  SUBJECT: Sakura Investment LLC (Name of Limited Liability Company)					
SUBJECT: Sakura Investment LLC (Name of Limited Liability Company)					
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to:					
Maria B. Semidey (Contact Person)					
(Firm/Company)  16122 Emerald Cove Rd  (Address)					
Weston FL 33331 (City/State and Zip Code)					
For further information concerning this matter, please call:					
Maria B. Semidey at (954) 4791266  (Name of Contact Person) (Area Code & Daytime Telephone Number)					
Enclosed please find a check made payable to the Florida Department of State for:  ☐ \$25 Filing Fee ☐ \$55 Filing Fee & Certified Copy					
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of Corporations					

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E079 (2/14)

P.O. Box 6327

Tallahassee, FL 32314







## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability comp	oany as it app	pears on the recor	ds of the Florida Department
of State is:	Sakura	Inves	stment	LLC
2. The Florida doci	ument/registration nur	nber assigne	d to this limited l	iability company is:
_L1600	7806000	5		
3. The date this me	ember/manager withdr	ew/resigned	or will withdraw/	resign is: 01/01/2020
4.1. Andre	a Ruffon Jame of Person Resigning)	<u>.</u> .	hereby withdraw	/resign as a
MG	R (Print Title)	·		
of this limited lial resignation in wr		firm the limi	ted liability comp	oany has been notified of my
Signature of Di	Sociating Member or	Resigning M	Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			