

Florida Department of State
Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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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)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: FLORIDA

2. The Florida document/registration number assigned to this limited liability company is:
L16000027806

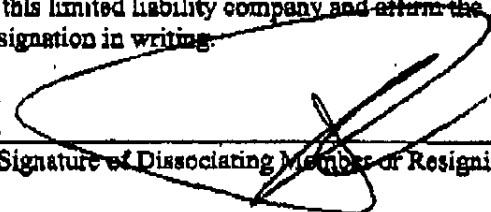
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 03/07/2018

4. I, LUIS I. DARRIGRANDI, hereby withdraw/resign as a
(Print Name of Person Resigning)

AMBR

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

X 
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
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