

216000109544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

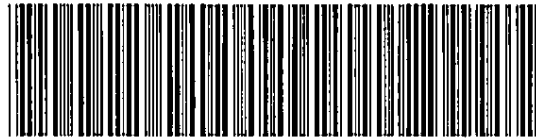
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500306399055

12/08/17--01012--002 ++25.00

FILED  
17 DEC -8 PM 1:29  
NOTARIAL PUBLIC  
STATE OF FLORIDA

S. WARREN

DEC 11 2017

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GAM GROUP, 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:

Isis Valle

(Contact Person)

Isis Valle, P.A.

(Firm/Company)

3625 NW 82 Avenue, Suite 405

(Address)

Miami, Florida 33166

(City/State and Zip Code)

For further information concerning this matter, please call:

Isis Valle

at (305) 722-0606

(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

**STREET/COURIER ADDRESS:**

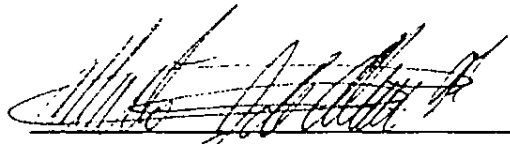
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**RESIGNATION OF MANGER OF  
GAM GROUP, LLC, A FLORIDA LIMITED LIABILITY COMPANY**

I, Alberto De Abreu, the undersigned, effective immediately hereby resign as Manager, of  
GAM Group, LLC, a Florida liability company, Document Number L16000109544, this 13th day of  
November, 2017.

  
\_\_\_\_\_  
Alberto De Abreu

FILED  
17 DEC -8 PM 1:29  
CLERK OF CIRCUIT COURT  
MIAMI, FLORIDA