L16000123115

(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:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 OCT 24 PM 2:38

NOV 04 2016

S. YOUNG

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 26, 2016

ALVARO A ACEVEDO
BRICKELL LAW GROUP
1395 BRICKELL AVENUE STE 800
MIAMI, FL 33131

SUBJECT: KOALA ASSOCIATES LLC
Ref. Number: L16000123115

We have received your document for KOALA ASSOCIATES LLC and your check(s) totaling $35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 116A00022981

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KOALA ASSOCIATES 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:

ALVARO A. ACEVEDO
(Contact Person)

BRICKELL LAW GROUP
(Firm/Company)

1395 BRICKELL AVENUE, SUITE 800
(Address)

MIAMI, FLORIDA 33131
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA
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For further information concerning this matter, please call:

ALVARO A. ACEVEDO at (305) 200-8686
(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

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)

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TALLAHASSEE, FLORIDA

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

2. The Florida document/registration number assigned to this limited liability company is: L16000123115

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/17/2016

4. I, Fabio Novaes Perim, hereby withdraw/resign as a
(Print Name of Person Resigning)

Member
(Print Title)

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

Signature of Dissociating Member or Resigning Manager

Filing Fee: $25.00 (Required)
Certified Copy: $30.00 (Optional)