

L16000149603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

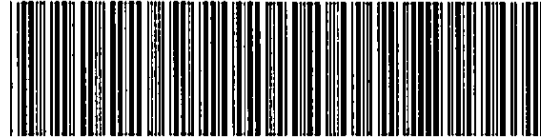
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Special Instructions to Filing Officer:

J. HORNE  
FEB - 2 2022

2/1

Office Use Only



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2022 FEB - 1 AM 8:19

SECRETARY OF STATE  
TALLAHASSEE, FL 32310



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 29, 2021

EZAUL PEREYRA  
1819 7TH AVE N  
LAKE WORTH, FL 33461 US

SUBJECT: GRUPO PEREYRA LLC  
Ref. Number: L16000149603

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a OFFICER / DIRECTOR RESIGNATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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) 245-6050.

Jasmine N Horne  
Regulatory Specialist II

Letter Number: 321A00031419

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GRUPO PEREYRA 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:

Jose R Nina

(Contact Person)

GRUPO PEREYRA LLC

(Firm/Company)

6967 SW 115th Pl, Apt F

(Address)

Miami FL 33173

(City/State and Zip Code)

For further information concerning this matter, please call:

Jose R Nina

at (305) 6097170

(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:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FILED

2022 FEB -1 AM 8:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: GRUPO PEREYRA LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L16000149603

3. The date this member/manager withdrew/resigned or will withdraw/resign is: \_\_\_\_\_

4. I, JOSE R NINA MONTAN, hereby withdraw/resign as a  
(Print Name of Person Resigning)

MGR

(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)