

To:

Page: 2 of 4

2025-01-27 16:37:15 GMT

13054895914

From: Aslan Tax Services Platinum Tax Filing

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the tax audit number (shown below) on the top and bottom of all pages of the document.

((H25000025894 3)))



H250000258943ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-5383

From:

Account Name : PLATINUM TAX FILING INC

Account Number : 120230000076

Phone : (305)644-9144

Fax Number : (305)489-5914

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

IGUAZU FAMILY, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

FILED
JAN 27 2025
TALLAHASSEE, FLORIDA

2025 JAN 27 PM 5:20

FILED

K. SALY

JAN 28 2025

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IGUAZU FAMILY, 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:

IRMA SERNA
(Contact Person)

PLATINUM TAX FILING INC
(Firm/Company)

1770 WEST FLAGLER ST SUITE 5
(Address)

MIAMI, FL 33135
(City/State and Zip Code)

For further information concerning this matter, please call:

IRMA SERNA at 305 644-9144
(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



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: IGUAZU FAMILY, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L16000177045

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/28/2024

4. I, FRANCISCO A. JIMENEZ, 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)
Certified Copy: \$30.00 (Optional)

FILED

2025 JAN 27 PM 5:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA