Division of Corporations Electronic Filing Cover Sheet

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

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ACCOUNT BOOKKEEPING CORP

Account Number : I20120000055

: (407)898-1757

Phone Fax Number

: (407)897-5336

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

Email Address:____

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Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

TO: Registration Se Division of Cor				
IMPORT F	L LLC			
SUBJECT:	Name of Lim	ited Liability Company		-
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	GISELE SOUZA			
		Name of Person		
	ACCOUNT BOOKKEEP			
	ACCOMI BOOKKELI			·
		Firm/Company		
	5301 CONROY ROAD S	UITE 140		
	And the second s	Address		
	ORLANDO FL 32811			18
		City/State and Zip Code		18 PEC
	INFO@ABKCORP.COM	to be used for tuture annual	report polification	- 35 3 1
			repetit iiberiteaanity	SELVE
For further information c	oncerning this matter, please c	aii:		SEE TO
GISELE SOUZA		407 89 at ()	8-1757 	
Name o	f Person	Area Code	Daytime Telephone Nur	nber E. O
Enclosed is a check for th	o following amount:			
≘ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enc	Certi losed) Certi	Diffing Fee, ficate of Status & fied Copy onal copy is enclosed)
Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations DX 6327 sseer FL-32314	Registrat Division Clifton B 2661 Exc	C/COURIER ADDRESS ion Section of Corporations uilding cutive-Genter Circle	S:

W80003427193

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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)

L16000194424	er assigned to this limited liability company is:
The date this member/manager withdrew AJAURI BARROS DE MELO	//resigned or will withdraw/resign is: 11/30/2018:
(Print Name of Person Resigning) Manager	Ev e C
(Print Title) of this limited liability company and affire resignation in writing.	m the limited liability company has been notified of my
Paux	1
Signature of Dissociating Member or Ri	tsigning Manager

4380003427193

CR2E079 (2/14)