

L16000197851

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

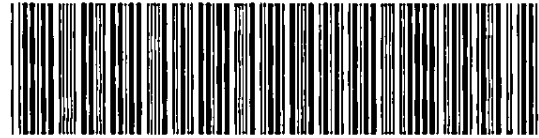
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Luis E. Diaz & Associates, P.A.
Attorney and Counselors at Law

1529 S.W. 1st Street
Miami, Florida 33135

Telephone: (305) 642-0078
Facsimile: (305) 646-2452

October 31, 2018

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

Re: Dissociation or Resignation of Member from
MAKAI FASHION LLC

Dear Sir or Madam:

Enclosed please find an original and 1 copy of the Dissociation or resignation of Member of MAKAI FASHION LLC, a Florida limited liability company. Also enclosed is a check totaling \$25.00 payable to the Florida Department of State. Please file same and submit to us a stamped copy in the attached pre-stamped, self-addressed envelope.

If you have any questions, please do not hesitate to call me at (305) 642-0078.

Sincerely,
Luis E. Diaz
Luis E. Diaz, Esq.

Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAKAI FASHION 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:

LUIS E. DIAZ, ESA.
(Contact Person)

LUIS E. DIAZ & ASSOC. P.A.
(Firm/Company)

1529 S.W. 1ST STREET
(Address)

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

For further information concerning this matter, please call:

LUIS E. DIAZ at (305) 642-0078
(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



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: MAKAI FASHION LLC.
2. The Florida document/registration number assigned to this limited liability company is:
L16000197851.
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/31/2018
4. I, DIDIER LEVU, hereby withdraw/resign as a
(Print Name of Person Resigning)
MANAGER
(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)

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TALLAHASSEE, FL