

L17 0000000818

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

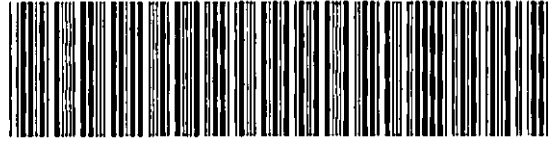
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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OCT 13 2020

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FILED  
2020 OCT 13 PM 4:40  
U.S. DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

NOV 17 2020

S. YOUNG

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ESLO INVESTMENTS 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:

Maikel Eskander

\_\_\_\_\_  
(Contact Person)

\_\_\_\_\_  
(Firm/Company)

1101 NE 6th St. Unit C

\_\_\_\_\_  
(Address)

Fort Lauderdale, FL 33304

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Maikel Eskander at ( 954 ) 807-3000  
\_\_\_\_\_  
(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: ESLO INVESTMENTS LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L17000000818

3. The date this member/manager withdrew/resigned or will withdraw/resign is: Oct. 9, 2020

4. I, Maikel N. Eskander, 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)

FILED  
2020 OCT 13 PM 4:40  
CLERK OF THE COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE NINTH JUDICIAL CIRCUIT  
TALLAHASSEE, FLORIDA