

L17000023850

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300296257843

03/20/17--01037--023 **55.00

MAR 21 2017
S. YOUNG

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 MAR 20 PM 12:57

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MIA FAJAS 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:

LINA VASQUEZ
(Contact Person)

(Firm/Company)

4095 SW 137 AV. #13
(Address)

MIAMI, FL 33175
(City/State and Zip Code)

For further information concerning this matter, please call:

LINA VASQUEZ at (305) 552-1552
(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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 MAR 20 PM 12:57



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: MIA FAJAS LLC

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

L17000023850

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

4. I, ELENA SERNA MUNERA, 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.

→ [Signature]

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)

Certified Copy: \$30.00 (Optional)