L17000102002

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

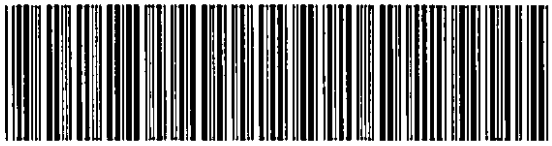
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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TALLAHASSEE FLORIDA

D BRUCE
AUG 04 2018

# COVER LETTER

**TO:** Registration Section
Division of Corporations

**SUBJECT:** ESPINOSA_LAW 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:

CHRISTIAN ESPINOSA
(Contact Person)

ESPINOSA_LAW LLC
(Firm/Company)

101425 OVERSEAS HIGHWAY
(Address)

KEY LARGO, FL 33037
(City/State and Zip Code)

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TALLAHASSEE FLORIDA

For further information concerning this matter, please call:

CHRISTIAN ESPINOSA at (941) 400-6488
(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

CR2E079 (2/14)

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: ESPINOSA_LAW LLC.

2. The Florida document/registration number assigned to this limited liability company is: L17000102002.

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 07/20/2018

4. I, MACHUCA, ALEJANDRA, hereby withdraw/resign as a
*(Print Name of Person Resigning)*

AUTHORIZED MEMBER
*(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

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TALLAHASSEE FLORIDA

Filing Fee: $25.00 (Required)
Certified Copy: $30.00 (Optional)