

Division of Corporations

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**L17000131045**

Florida Department of State  
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 : E & F LATIN GROUP LLC  
Account Number : 129160000046  
Phone : (954) 394-9500  
Fax Number : (954) 385-6175

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

Email Address: office@eflatinaccounting.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
VR LABEL LLC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 03      |
| Estimated Charge      | \$25.00 |

2017 OCT -5 AM 8:34

INITIALS: 10/5/17

10/5/17

17 OCT -5 AM 8:49

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Corporate Filing Menu

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** VR LABEL 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:

DIEGO FIGUEROA

(Contact Person)

E&F LATIN GROUP LLC

(Firm/Company)

1820 N CORPORATE LAKES BLVD STE 109

(Address)

WESTON FL 33326

(City/State and Zip Code)

For further information concerning this matter, please call:

DIEGO FIGUEROA

(Name of Contact Person)

at ( 954 ) 384 8565

(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  
2601 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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

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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)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: VR LABEL LLC
2. The Florida document/registration number assigned to this limited liability company is: L17000131045
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/02/2017
4. I, VALENTINA GARCIA, 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.

A handwritten signature in cursive script, appearing to read "V. Garcia", is written over a horizontal line.

Signature of Dissociating Member or Resigning Manager

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