17000169152

| (Rec | questor's Name) | |
|---------------------------|----------------------|-----------|
| (Adc | lress) | |
| (Add | dress) | |
| (City | //State/Zip/Phone # | ¢) |
| | | |
| (Bus | siness Entity Name | 2) |
| (Doc | cument Number) | |
| Certified Copies | Certificates c | of Status |
| Special Instructions to F | - Filing Officer: | |
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| | | |
| | | |
| | Office Use Only | |



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FILED

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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: FUTURE SMILES CHILD CENTER 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:

Romy B. Jurado, Esq.

(Contact Person)

Jurado and Farshchian, PL

(Firm/Company)

12955 Biscayne Boulevard, Suite 328

(Address)

North Miami, FL 33181

(City/State and Zip Code)

For further information concerning this matter, please call:

 Romy B. Jurado
 33181
 (305) 921-0440

 (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 \$\$ Certified Copy\$\$

Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Stilte 810Tallahassee, FL 32303Tallahassee, FL 32303

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:

2. The Florida document/registration number assigned to this limited liability company is: L17000169152

3. The date this member/manager withdrew/resigned or will withdraw/resign is: $\frac{\pi m/2020}{24co} \simeq$

_____, hereby withdraw/resign as a

Osmel Martinez 4. 1.

(Print Name of Person Resigning)

President, Vice President, General 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: Certified Copy: \$25.00 (Required) \$30.00 (Optional)

CR2E079 (2/14)