

L17000213615

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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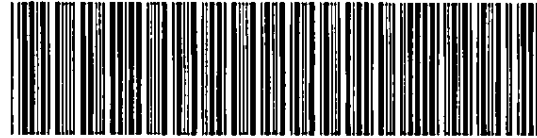
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GLOBAL TEMPERING LLC

\_\_\_\_\_  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L17000213615

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CHRISTOPHER ZACARIAS

\_\_\_\_\_  
Name of Person

Law Offices of Christopher F. Zacarias, P.A.

\_\_\_\_\_  
Name of Firm/Company

8660 W. Flagler Street, Suite 100

\_\_\_\_\_  
Address

Miami, Florida 33144

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

czacarias@zacariaslaw.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHRISTOPHER ZACARIAS

at ( 305 ) 403-2000

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

**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

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# STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

LUIS CAMILO FERNANDEZ

, hereby resigns as

Name of Registered Agent

Registered Agent for GLOBAL TEMPERING LLC

Name of Limited Liability Company

1.17000213615

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

Signature of Resigning Agent

If signing on behalf of an entity:

Luis Camilo Fernandez 786 512 5187

Typed or Printed Name

Manager, CEO, Authorized Member

Capacity

2022 AUG. 25 AM 11:43

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## FILING FEES:

\$ 85.00 Active limited liability company  
\$ 25.00 Administratively dissolved/ voluntarily dissolved/  
withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000213615

**Entity Name:** GLOBAL TEMPERING LLC

**Current Principal Place of Business:**

850 W 19TH STREET  
HIALEAH, FL 33010

**Current Mailing Address:**

19380 COLLINS AVENUE  
APT. 706  
SUNNY ISLES BEACH, FL 33160 US

**FBI Number:** 82-3087244

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FERNANDEZ, LUIS CAMILO  
665 NE 72ND TER  
MIAMI, FL 33138 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida*

**SIGNATURE:** LUIS CAMILO FERNANDEZ

04/30/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

**Title** MANAGER, CEO, AUTHORIZED  
MEMBER  
**Name** FERNANDEZ, LUIS CAMILO  
**Address** 19380 COLLINS AVENUE  
APT. 706  
**City-State-Zip:** SUNNY ISLES BEACH FL 33160

**Title** OTHER  
**Name** BARRIOS, MAIKEL  
**Address** 1855 W 60TH STREET, APT. 342  
**City-State-Zip:** HIALEAH FL 33012

**Title** OTHER  
**Name** TOCA, JORGE LUIS  
**Address** 1455 SW 155TH CT  
**City-State-Zip:** MIAMI FL 33194

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes, and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LUIS CAMILO FERNANDEZ

MANAGER MEMBER, CEO 04/30/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date