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Account Number : I20120000055 Phone : (407)898-1757

Fax Number : (407)897-5336

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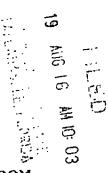
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TO:	Registration Section Division of Corporations	
SHR	ECT: SASIBRAMM USA	LLC
D¢ D	(Name of Limited Liability	у Сотрану)
The e	nclosed member, resignation or dissociation and	fee(s) are submitted for filing.
Plcas	e return all correspondence concerning this matte	r to:
	STEPHANIE CASTRO	
	(Contact Person)	
	ACCOUNT BOOKKEEPING CORP	
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	(Address)	
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Regi Divis Clift 2661	EET/COURIER ADDRESS: stration Section ion of Corporations on Building Executive Center Circle hassee, 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 FIGORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

	The name of the limited liability company as it as	opears on the records of the Florida Department A LLC	
	State is: c Florida document/registration number assigned to this limited liability company is: L17000230874		
3.	The date this member/manager withdrew/resigns MARCOS DUARTE DE OLIVEIRA	d or will withdraw/resign is: 04/30/2019 , hereby withdraw/resign as a	
4.	(Print Name of Person Resigning) MEMBER		
	(Print Title) of this limited liability company and affirm the li- resignation in writing.	mited liability company has been notified of my	
	Marca Feline Duante & Observer Signature of Dissociating Member or Resignin	g Manager	

CR2E079 (2/14)