117000243171

(Re	questor's Name)					
(Address)						
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Diss of Mem Jose Bacile

04/24/18--01032--022



N. CAUSSEAUX APR 2 3 2018

COVER LETTER

COVER LETTER
TO: Registration Section Division of Corporations COVER LETTER 17-243172
SUBJECT: JMW INNOBILIAPIAS 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:
(Contact Person) (Firm/Company)
305 NW 32 AVe. #307
Pompano BCh. FL, 38069 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (561) 283 5666 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\Pi\$\$ \$\pi\$\$ \$\pi\$\$ \$\pi\$\$ \$\pi\$\$ \$\pi\$\$ \$\pi\$\$ \$\pi\$\$ Filing Fee & Certified Copy
STREET/COURIER ADDRESS: MAILING ADDRESS:

Division of Corporations

Tallahassee, Florida 32314

Registration Section

P.O. Box 6327

CR2E079 (2/14)

Registration Section

Clifton Building

Division of Corporations

2661 Executive Center Circle

Tallahassee, Florida 32301



April 10, 2018

WILLIAMS DENIS JMW INMOBILIARIAS LLC 305 N.W. 32 AVENUE #302 POMPANO BEACH, FL 33069

SUBJECT: JMW INMOBILIARIAS LLC

Ref. Number: L17000243172

We have received your document for JMW INMOBILIARIAS LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 118A00007170

Nanette Causseaux Regulatory Specialist II Supervisor

www.sunbiz.org



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FEOM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY №

(Pursuant to 605.0216, Florida Statutes)

	limited liability company as i	- *		Florida D	epart	ment
of State is:	JMW INMO	biliapias	LLC			.
L 170	ment/registration number ass 200243172	·	•			
3. The date this me	mber/manager withdrew/resig	gned or will witho	draw/resign is:	4/	5/1	8
4. I, <u>J</u> e	Se BACILE ame of Person Resigning)	, hereby with	draw/resign as	a		
MA	NA ger. (Print Title)					
of this limited lial resignation in wri	oility company and affirm the ting.	limited liability	company has b	een notif	ied of	fmy
				_B	20	
Signature of Di	ssociating Member or Resign	ing Manager		JEPAR /ISION ALLA	18 APR -	RE
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			TMENT OF ST/ I OF CORPORAT HASSEE. FLOR	R-9 AMII:	ECEIVED