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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Espiritu Libre	LLC
(Name of L	imited Liability Company)
The enclosed member, resignation or disso	ociation and fee(s) are submitted for filing.
Please return all correspondence concerning	ng this matter to:
Elliot Erwin	
(Contact Person)	
Espiritu Libre LLC	
(Firm/Company)	
333 NE 24th St NAME FE	~ > >
(Address)	
Miumi FL 33137	
(City/State and Zip Code)	
For further information concerning this ma	atter, please call:
Elliot Ervin	at(<u>978</u>) 760 0405
(Name of Contact Person)	(Area Code & Daytime Telephone Number
Enclosed please find a check made payable \$25 Filing Fee	e to the Florida Department of State for: \$\Boxed{\Boxesia} \$\\$\\$\$ \$\\$\$ \$\\$\$ Filing Fee & Certified Copy
<u> </u>	Δφυ timig to de detimina συρ;
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314

CR2E079 (2/14)

Tallahassee, Florida 32301



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: ESPicitu Libre. LLC	·
2. The Florida document/registration number assigned to this limited liabili	ty company is:
L1800001618	
3. The date this member/manager withdrew/resigned or will withdraw/resigned or will will will will will will will wil	
4.1. Christophed Dahas, hereby withdraw/resigning), hereby withdraw/resigning)	gn as a
Managel (Print Title)	
of this limited liability company and affirm the limited liability company by resignation in writing.	has been notified of my
Signature of Dissociating Member or Resigning Manager	
Filing Fee: \$25.00 (Required)	2019 SEC TA

Certified Copy: \$30.00 (Optional)