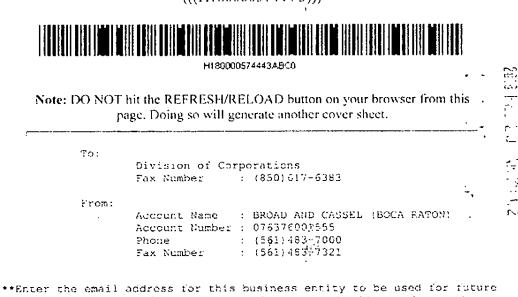
Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000057444 3)))



annual report mailings. Enter only one email address please.\*\*

Email Address:	ptmelo@integraff.com

\_\_\_\_\_

## LLC AMND/RESTATE/CORRECTIOR M/MG RESIGN ROTAME KEY WEST LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

RECEIVED FEB 20 2018

J. HARRIS Corporate Filing Meau Help Electronic Filing Menu



210

## 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)

	limited liability company as	s it appears on the records of the l	Florida Department
2. The Florida doc L1800001293		ssigned to this limited liability co	mpany is:
3. The date this me	ember/manager withdrew/res	signed or will withdraw/resign is:	01/17/18
4. I. Paulo Tavares de Melo  (Print Name of Person Resigning)  Manager			
		e limited liability company has be	cen notified of my
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)	ning Manager	15.00