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.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ACCOUNT BOOKKEEPING CORP

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

Fax Number : (407)897-5336

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: INFOCO ABK CORP. Com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RAYARRA IMPORTS LLC

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: RAVARRA IMPORTS LLC	
(Name of Lim	ated Liability Company)
The enclosed member, resignation or dissoci	ation and fee(s) are submitted for filing.
Please return ali correspondence concerning	this matter to:
JULIA TEDESCO	_
(Contact Person)	
ACOUNT BOOKKEEPING CORP	
(Firm/Company)	<del></del>
5301 CONROY ROAD SUITE 140	
(Address)	<del></del>
ORLANDO, FL 32811	·
(City/State and Zip Code)	<del></del>
For further information concerning this matter	er, please call:
JULIA TEDESCO	407 898-1757
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to ■ \$25 Filing Fee	o the Florida Department of State for:  \$\square\$\$ \$\square\$\$ \$\square\$\$ \$\square\$\$ \$\square\$\$ \$\square\$\$ \$\square\$\$\$ \$\square\$\$\$ \$\square\$\$\$ \$\square\$\$\$ \$\square\$\$\$ \$\square\$\$\$ \$\square\$\$\$ \$\square\$\$\$\$ \$\square\$\$\$\$\$ \$\square\$\$\$\$\$ \$\square\$\$\$\$ \$\square\$\$\$\$\$ \$\square\$\$\$\$\$ \$\square\$\$\$\$\$\$\$\$\$ \$\square\$
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

CR2E679 (2/14)

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314





## FLORIDA DEPARTMEN'I OF STATE DIVISION OF CORPORATIONS

## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

2. The Florida document/registration number L18000083163	assigned to this limited liability company is:
3. The date this :nember/manager withdrew/ro	esigned or will withdraw/resign is:
4. 1, VINICIUS MORENO RAVARRA  (Print Name of Person Resigning)	
(Print Tule)	
of this limited liability company and affirm resignation in writing.	the limited liability company has been notified of my

CR2E079 (2/14)