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Office Use Only



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2018 AUG 17 AM 11: 55 SECRETARY OF STATE TALLAHASSEE, FL

R. WHITE AUG 27 2018

COVER LETTER

Division of Corporations				
SUBJECT: Beyond Technologies Management Services (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:				
Ramon Garcia (Contact Person)				
(Firm/Company)				
530 NE 69 St. (Address)				
Miami, FL 33138 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Ramon Garcia at (186) 675-0736 (Name of Contact Person) (Area Code & Daytime Telephone Number)				
Enclosed please find a check made payable to the Florida Department of State for: \$\subset\$ \$\\$\\$25 \text{Filing Fee}\$\$ \$\subset\$ \$\\$55 \text{Filing Fee} & Certified Copy				
STREET/COURIER ADDRESS: Registration Section MAILING ADDRESS: Registration Section				

Division of Corporations

Tallahassee, Florida 32314

P.O. Box 6327

CR2E079 (2/14)

Clifton Building

Division of Corporations

2661 Executive Center Circle

Tallahassee, Florida 32301

TO: Registration Section



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 appear	s on the records of the Florida Departi	nent
of State is: <u>Be</u>	gond Technologies Man	agement Services LU	<u>^</u> .
2. The Florida docu	ment/registration number assigned to	this limited liability company is:	
48000	090458		
3. The date this me	mber/manager withdrew/resigned or v	will withdraw/resign is: 8 14/18	,
	ey Martinez, her		
Mana	Print Title)		
of this limited lial resignation in wr		liability company has been notified of	my
Ý	W.D.	2018 SEC TA	
Signature of Di	ssociating Monber or Resigning Man	2018 AUG 17 SECRETAR' TALLAHA	T
	\$25.00 (Required) \$30.00 (Optional)	17 AM 9: ARY OF STA CHASSEE, F	ED
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