## 116000092362

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## **COVER LETTER**

**Division of Corporations** Solo Fuego Music SUBJECT: (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for tiling. Please return all correspondence concerning this matter to: Bryan Torres (Contact Person) Solo Fuego Music LLC. (Firm/Company) 513 w. colonial drive unit 5 (Address) Orlando, FI 32804 (City/State and Zip Code) For further information concerning this matter, please call: Bryan Torres at ( 407 ) 722-0931
me of Contact Person) (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee
 ■ ☐ \$55 Filing Fee & Certified Copy Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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 lim	ited liability company as it appears on the records of the Florida Department	
of State is: So	olo Fuego Music	
2. The Florida docume	nt/registration number assigned to this limited liability company is:	
L18000092362		
3. The date this member	er/manager withdrew/resigned or will withdraw/resign is: March 17, 2021	
	Aviles Charon hereby withdraw/resign as a of Person Resigning)	
VP, Authorized Representative (Print Title)		
of this limited liabilit resignation in writing	y company and affirm the limited liability company has been notified of my	
Calaine	aniles Chare	
Signature of Dissoc	ciating Member or Resigning Manager	
Filing Fee: Sertified Copy: Se	\$25.00 (Required) <b>#</b> \$30.00 (Optional)	