L18000099244

•
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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2020 OCT 21 PM 4: 27
SECRETARY OF STATE

12/1/20

2645 S.W. 37th Avenue, Suite 504, Miami, Florida 33133 Telephone: (305) 448-2297 E-Mail: Jennifer@Sardinalaw.com

October 15, 2020

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street Suite 810 Tallahassee, FL 32303

Re: Mary Amado, LLC

FL Document No. L18000099244

To whom it may concern,

Enclosed for the above-referenced please find check #8378 in the amount of \$115 as payment for the "Dissociation or Resignation of Member, Manager from Florida or Foreign Limited Liability Company" and the "Articles of Amendment to Articles of Organization of Mary Amado, LLC" of which both are included and fully executed.

Kindly please use the enclosed self-addressed stamped envelope for the return of the requested documents.

Should you have any questions or require any further documentation, please do not hesitate to contact our office.

Thank you,

Jénnifer Sardiña

Enc: Check No.

Postage paid stamped envelope

Artides / Form

JS/imc

COVER LETTER

TO:	_	stration Section ion of Corporations			
	171115	non of Corporations			
SUBJ	ECT:	Mary Amado LLC			
		(Name of	Limited Li	ability Co	mpany)
The er	nelosed	I member, resignation or dis	sociation	and fee(s) are submitted for filing.
Please	return	all correspondence concern	ing this n	natter to	:
AMAE	00, MA	RIA E			
		(Contact Person)			_
Mary A	Amado I	.I.C			
		(Firm/Company)			_
79 SW	12th St	reet, Apt. 2210			
		(Address)			_
Miami.	. FL 331	30			
		(City/State and Zip Code)		-	_
For fu	rther in	nformation concerning this n	natter, ple	ease call	:
AMAE	00, MA	RIA E	7 at {	786	920-4004
	(N	ame of Contact Person)		Area Cod	e & Daytime Telephone Number)
Enclos	sed ple	ase find a check made payat	ole to the	Florida I	Department of State for:
☐ \$25	5 Filing	g Fee	⊠ \$	S55 Filin	g Fee & Certified Copy
	<u>Mailir</u>	ng Address:			Street Address:
		stration Section			Registration Section
		ion of Corporations			Division of Corporations
		Box 6327 hassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
	тапа	nassee, fil 54514			Tallahassee, FL 32303



2020 OCT 21 PH 4: 27
SECRETARY OF STATE
TALLAUASSES. FL

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)

	c limited liability company as it appears on the records of the Florida Department Amado, LLC
	cument/registration number assigned to this limited liability company is:
4. l, Alvaro Alfonso	ember/manager withdrew/resigned or will withdraw/resign is: Soto Rincon
Manager	
 	(Print Title)
of this limited lia resignation in w	ability company and affirm the limited liability company has been notified of my riting.
Signature of D	issociating Member or Resigning Manager
•	\$25.00 (Required) \$30.00 (Optional)