L18000209598

(R	equestor's Name)	
(A	ddress)	
	,	
(A	ddress)	
(C	ity/State/Zip/Phone #j)
PICK-UP	■ WAIT	MAIL
_	_	_
(B	usiness Entity Name)	
(D	ocument Number)	
Carified Canies	Cartificator of	Chabus
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
'	J	

Office Use Only



700416253887

09/27/23--01033--005 **55.00





COVER LETTER

TO: Registration Section Division of Corporations

CR2E079 (2/14)

SUBJECT: VSI	305	LLC
	f Limited Liability Co	
The enclosed member, resignation or dis	ssociation and fee((s) are submitted for filing.
Please return all correspondence concern	ning this matter to	:
VICTOR SEC (Contact Person)	OUPA.	_
(Contact Person)		
VSB 305	LLC	
(Firm/Company)		_
941 NW 104 A (Address)	we	
(Address)		_
Miami FL 3	33172	
(City/State and Zip Code)	•	_
For further information concerning this	matter, please call	:
VICTOR SEGURA (Name of Contact Person)	at (<u>786</u> (Area Cod	e & Daytime Telephone Number)
Enclosed please find a check made paya ☐ \$25 Filing Fee	able to the Florida	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



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 lost of State is:	limited liability comp	any as it appear		of the Florida	Depart	ment	
L18000	ment/registration num 209598					. 1	
3. The date this mer	mber/manager withdre	w/resigned or	will withdraw/res	sign is:OC	7/01	./ <i>20</i> 2	2_3
4.1. Uraimo	SeSuva	, he	reby withdraw/re	sign as a	,	,	
MG	, <u>R</u>						
	Print Title)	<u> </u>					
of this limited liab resignation in wri	oility company and aff ting.	irm the limited	liability compan	y has been no	otified o	of my	
Signature of Dis	ssociating Member or	Resigning Man	nager		123 SEP 2	1 }	
Filing Fee:				• •	7	5.00	
Certified Copy:	\$30.00 (Optional)				PH 3: 2:		