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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates of	of Status
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Special Instructions to Filing Officer:		
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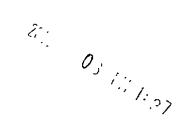
COVER LETTER

TO: Registration Section

CR2E079 (2/14)

Divis	ion of Corporations			
SUBJECT:	THE VISUALIST LLC			
oobject.	(Name of Limi	ted Liability Cor	пралу)	
The enclosed	member, resignation or dissocia	ation and fee(s	s) are submitted for filing.	
Please return	all correspondence concerning t	his matter to:		
GABRIELA	M. VIDAL FERNANDEZ			
	(Contact Person)		_	
THE VISUA	ALIST LLC			
	(Firm/Company)		_	
3381 WES	T 105TH TER			
	(Address)			
HIALEAH C	GARDENS, FL 33018			
	(City/State and Zip Code)		 -	
For further in	formation concerning this matte	г. płease call:		
DAINIRA F	ALK	786	717-1534	
(N:	ame of Contact Person)		& Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida Department of State for: \$\begin{align*} \text{Enclosed please find a check made payable to the Florida Department of State for: \$\begin{align*} \text{\$\text{Enclosed please find a check made payable to the Florida Department of State for: \$\begin{align*} \$\text{\$\$\text{\$\tex{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\				
	, . 55			
Registration :			MAILING ADDRESS: Registration Section	
Division of C	•		Division of Corporations P.O. Box 6327	
	ing ve Center Circle Florida 32301		Tallahassee, Florida 32314	





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)

	limited liability company as i	it appears on the records of the Florida Department
2. The Florida docu	_	signed to this limited liability company is:
		gned or will withdraw/resign is:
4. I, FRANKLIN J	. ROSS CHALITA ame of Person Resigning)	, hereby withdraw/resign as a
MGR		·
	(Print Title)	
of this limited lial resignation in wri	- / 1 -	limited liability company has been notified of my
Signature of Di	ssociating Member or Resign	ing Manager
	\$25.00 (Required) \$30.00 (Optional)	