## 1190000079031

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
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TILED BAY -8 P B 31

T. LEMEUX

## **COVER LETTER**

_	tration Section on of Corporations		
SUBJECT:	PEOPLE MOTORS. LLC		
	(Name of Lin	nited Liability Con	прапу)
The enclosed	member, resignation or dissoc	iation and fee(s	) are submitted for filing.
Please return	all correspondence concerning	this matter to:	
YAMIR VAL	DERAS		
	(Contact Person)		<del>-</del>
	(Firm/Company)		_
	(Find Company)		
3030 SW 2r	nd ST		
	(Address)		<u></u>
MIAMI, FL 3	3135		
	(City/State and Zip Code)		-
For further in	formation concerning this mat	ter, please call:	
YAMIR VAL	DERAS	786 at (	853-8345
(Na	ime of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed plea  ■ \$25 Filing	ise find a check made payable. Fee		Department of State for: 3 Fee & Certified Copy
STREET/CO	OURIER ADDRESS:		MAILING ADDRESS:
Registration S			Registration Section
Division of C			Division of Corporations
Clifton Buildi	ing ve Center Circle		P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, F			rananassee, Fiorida 52514

CR2E079 (2/14)



## 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	s it appears on the reco	ords of the Florida Department
2. The Florida doc L1900007903	ument/registration number a	ssigned to this limited	liability company is:
3. The date this mo	ember/manager withdrew/res	signed or will withdray	w/resign is:
4. I, HUMBERTO GONZALEZ  (Print Name of Person Resigning)			
(Print N	lame of Person Resigning)	•	_
MANAGER			
	(Print Title)		
of this limited lia resignation in wr	- · · · · · · · · · · · · · · · · · · ·	ne limited liability com	npany has been notified of my
11			
Signature of D	issociating Member or Resig	ning Manager	
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)	· _ •	2019 HAY -8 PD 12