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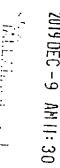
(Re	questor's Name)			
(Ad	dress)	··-		
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(Cit	ry/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	·			
Special Instructions to Filing Officer:				





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COVER LETTER

TO: Registration Section Division of Corporations		
Division of Corporations		
SUBJECT: Sunshine Services 776 LLC		
(Name of Lim	ited Liability Cor	npany)
The enclosed member, resignation or dissociation	ation and fee(s	s) are submitted for filing.
Please return all correspondence concerning	this matter to:	
Victor Suarez		
(Contact Person)	·	<u></u>
(Firm/Company)		_
340 West Flagler Street #2810		
(Address)		_
Miami, FL 33130		
(City/State and Zip Code)		_
For further information concerning this matte	er, please call:	
Victor Suarez	305 at (527-0746
(Name of Contact Person)		: & Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee		Department of State for: g Fee & Certified Copy
STREET/COURIER ADDRESS:		MAILING ADDRESS:
Registration Section Division of Corporations		Registration Section Division of Corporations
Clifton Building		P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301		Tallahassee, Florida 32314

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)

	mited liability company as it ine Services 776 LLC	appears on the records of the	Florida Department
2. The Florida docum L19000103950	nent/registration number assig	gned to this limited liability ed	ompany is:
3. The date this mem	ber/manager withdrew/resigr	ned or will withdraw/resign is:	11/01/2019
Karla Cuayara		, hereby withdraw/resign as	
of this limited liabi resignation in writi	F - F	limited liability company has t	oeen notified of my
Filing Fee: Certified Copy:	\$2,5.00 (Required)		2019 DE