

10/29/2019

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000319579 3)))



H190003195793ABC9

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CUEVAS, GARCIA & TORRES, P.A.

Account Number : I20030000123

Phone : (305)461-9500

Fax Number : (786)362-7127

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
RETAL HOLDINGS LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

H190003195793

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 limited liability company as it appears on the records of the Florida Department of State is: RETAL HOLDINGS LLC

2. The Florida document/registration number assigned to this limited liability company is:
L19000208124

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/16/19

4. I, ANDREW CUEVAS, hereby withdraw/resign as a
(Print Name of Person Resigning)

AUTHORIZED MEMBER

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

A handwritten signature in black ink, appearing to read "Andrew Cuevas", written over a horizontal line.

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

FILED
2019 OCT 30 P 1:32
TALLAHASSEE, FLORIDA

H190003195793