

9/30/2020

Division of Corporations
 Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

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To:
 Division of Corporations
 Fax Number : (850)617-6383

From:
 Account Name : ALVAREZ, SUAZO & ASSOCIATES
 Account Number : I20130000076
 Phone : (305)388-7028
 Fax Number : (305)479-2705

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
 PTRHOME2019 LLC

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Estimated Charge	\$25.00

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Corporate Filing Menu

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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: PTRHOME2019 LLC
2. The Florida document/registration number assigned to this limited liability company is: L19000273208
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 09/23/2020
4. I, CLAUDIO MINONES, hereby withdraw/resign as a
(Print Name of Person Resigning)
MANAGER
(Print Title)

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

Claudio Minones Acrobat e-sign verified
09/29/20 11:064 PM
xw8-RF7-801G-U562
Signature of Dissociating Member or Resigning Manager

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