L2000014486H

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COVER LETTER

Division of Corporations	
SUBJECT: INTERWATER LLC	
(Name of Limited Liability Cor	npany)
The enclosed member, resignation or dissociation and fee(s	s) are submitted for filing.
Please return all correspondence concerning this matter to:	
Ezzatti Mieres, Julio G	_
(Contact Person)	
INTERWATER LLC	_
(Firm/Company)	
2555 collins ave #2201	_
(Address)	
Miami, FL 33140	_
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Joel aaron estallo at (+1	7867973323 & Daytime Telephone Number)
(Name of Contact Person) (Area Code	& Daytime Telephone Number)
Enclosed please find a check made payable to the Florida ☐ \$25 Filing Fee ■ \$55 Filing	Department of State for: g Fee & Certified Copy
E 333 i imig	gree accounted copy
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



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 I	imited liability company as	s it appears on the records of the I	² lorida De	epartment
of State is: _INTE	ERWATER LLC			<u> </u>
2. The Florida docum	ment/registration number a	ssigned to this limited liability co	mpany is	:
L200001448	64			
3. The date this men	nber/manager withdrew/res	signed or will withdraw/resign is:	03/17/	2021
' · • ;	ron Estallo me of Person Resigning)	, hereby withdraw/resign as	a	· ,
	resident			:
- (I	Print Title)		∶ .	ÇĎ.
of this limited liab resignation in writ		ne limited liability company has b	een notifi	ed of my e
Signature of Dis	sociating Member or Resig	ning Manager		
•	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			