L20000222172

(Red	questor's Name)	
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(City	//State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Doc	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to F	Filing Officer:	
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	Office Use On	lv



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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 12, 2020

TOMAS E. PIQUERO PIA CONSULTING LLC 600 NE 36 STREET, 1018 MIAMI, FL 33137

SUBJECT: PIA CONSULTING LLC

Ref. Number: L20000222172

We have received your document and check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE COMPLETE THE ATTACHED DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER AND RESUBMIT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 320A00022637

Susan Tallent Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: PIA CONSULTING (Name of Limit	ed Liability Company)
The enclosed member, resignation or dissocia	tion and fee(s) are submitted for filing.
Please return all correspondence concerning the	ns matter to:
TOMAS PIQUENO (Contact Person)	
PIA CONSULTING LL (Firm/Company)	<u>C</u>
Goo NE 36 th St, AP 10 (Address)	
MIAMI, FLORIDIA, 33' (City/State and Zip Code)	137
For further information concerning this matter	; please call:
TOMAS PIQUENO (Name of Contact Person)	at (<u>786</u>) <u>843</u> 2288 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to ☐ \$25 Filing Fee	the Florida Department of State for: S55 Filing Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



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 compa	any as it appears on the records of	of the Florida Department
of State is: P14	CONSULTING	LLC	
2. The Florida docu	ment/registration num	nber assigned to this limited liabi	lity company is:
L2000.	222172		
3. The date this me	mber/manager withdre	ew/resigned or will withdraw/res	ign is: 8/1/2020
4. I. <u>CACOLIO</u> (Print N	A AlMEIOA A ame of Person Resigning)	124N9CAhereby withdraw/res	sign as a
MANDGE	(Print Title)	<u> </u>	
of this limited lial resignation in wr		irm the limited liability company	y has been notified of my
		' •	
		<u>'</u>	~)
Signature of Dissociating Member or Resigning Manager			771 HOY 30
			V 32
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		P
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