

L20000222619

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

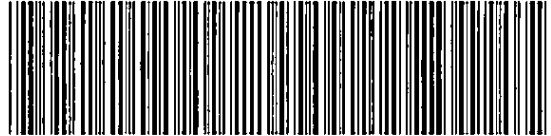
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Virtual Events, LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Alberto Mujica

(Contact Person)

ScaleUp Legal PLLC

(Firm/Company)

14629 SW 104th St Unit 107

(Address)

Miami, FL 33186

(City/State and Zip Code)

For further information concerning this matter, please call:

Alberto Mujica

at (786) 584-2825

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified 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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: Virtual Events, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L20000222619

3. The date this member/manager withdrew/resigned or will withdraw/resign is: January 19, 2024

4. I, Maria C. Terife, hereby withdraw/resign as a
(Print Name of Person Resigning)
VP
(Print Title)

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

DigiSigned by
carolina_terife@hotmail.com
Date: 01/19/2024
6:59:29 PM EST

Signature of Dissociating Member or Resigning Manager

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