

L20000381 074

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200429819262

05/17/24--01018--010 **25.00

FILED

2024 MAY 17 PM 3:44

SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Spillmug 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:

Michelle Mora
(Contact Person)

Spillmug LLC
(Firm/Company)

2891 SW 33rd CT Miami FL 33133
(Address)

Miami FL 33133
(City/State and Zip Code)

For further information concerning this matter, please call:

Michelle Mora at (407) 6680734
(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

FILED
2024 MAY 17 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FL



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: Spillmug LLC

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

L20000381074

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 05/13/2024

4. I, Juan Diaz - Moreno, hereby withdraw/resign as a
(Print Name of Person Resigning)

Manager (MGR)
(Print Title)

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

Juan Diaz - Moreno
Signature of Dissociating Member or Resigning Manager

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

FILED
2024 MAY 17 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FL