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(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
, , , , ,						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(business Entity Name)						
(Document Number)						
- w						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						





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COVER LETTER

TO: Registration S Division of C				
SUBJECT:	Live Alive (Name of Lir	6lobal	LLC.	
The enclosed member	er, resignation or dissoc	ciation and fee(s	s) are submitted for filing.	
Please return all corr	espondence concerning	g this matter to:		
Rodrigo	Hidalgo (Contact Person)		_	
	re Global Li	Lc.		
	(Firm/Company)		-	
11729	Albatross U	n ·	_	
Rivervieu	, Fl. 335	69		
((City/State and Zip Code)		_	
For further informati	on concerning this mat	ter, please call:		
Rodrigo	Hidalgo	_at (_8/3	298 · 8213 & Daytime Telephone Number	
(Name of C	Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed please find ☐ \$25 Filing Fee	a check made payable		Department of State for: g Fee & Certified Copy	
Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, I	Section Forporations 27		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suit Tallahassee, FL 32303	e 810



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	e limited lia	bility compan	y as it appears	on the records of	of the Florida D)epartm	ient
of State is:	Live	ALive	6 lobal	Llc.			<u>_</u> .
2. The Florida doc	ument/regis	tration numb	er assigned to	this limited liabi	lity company is	s:	
_ L 21 0	00021	161	·				
3. The date this me	ember/mana	iger withdrew	/resigned or w	ill withdraw/res	ign is: 8/17	-120	23
4. I, <u>Jero</u>	one Vame of Perso	Tabici	, here	by withdraw/res	sign as a		
Ma	Nages (Print Title)		<u>_</u> :				
of this limited lia resignation in w	-	any and affin	m the limited l	iability company	has been notif	fied of 1	my
Je	wd						
Signature of D	issociating	Member or R	esigning Mana	ger		2023 OCT	- 7 ,
Filing Fee: Certified Copy:		•				-3 PM 4:	Prof.