

K21 000107307

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

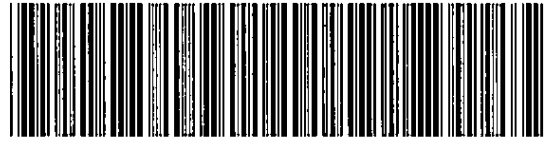
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

2021 JUN -4 PM 2:35

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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: FLORIDA

2. The Florida document/registration number assigned to this limited liability company is:
L210007307

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 04/25/2021

4. I, MIRNA E CALDERON OSORTO, hereby withdraw/resign as a
(Print Name of Person Resigning)
MGRM
(Print Title)

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

MIRNA CALDERON

Signature of Dissociating Member or Resigning Manager

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TALLAHASSEE, FLORIDA
2021 JUN -4 PM 2:35

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



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L210007307

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 04/25/2021

4. I, JOSE SERRANO, hereby withdraw/resign as a
(Print Name of Person Resigning)

MGRM

(Print Title)

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

Jose Serrano

Signature of Dissociating Member or Resigning Manager

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