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(Re	questor's Name)	
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O SHVING ...
DEC 1 5 2021

## COVER LETTER

TO: Registration Section Division of Corporations	
Minera Mathematica SUBJECT:	
SUBJECT: (Name of Limi	ited Liability Company)
The enclosed member, resignation or dissocia	
Please return all correspondence concerning t	this matter to:
Jeffery Scott Couron	
(Contact Person)	
Minera Mathematica	
(Firm/Company)	
25329 Geddy Dr.	
(Address)	<del></del>
Land O Lakes FL 34639	
(City/State and Zip Code)	<del></del>
For further information concerning this matte	er, please call:
J effery Scott Couron	813 973-1961 at ( )
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to	o the Florida Department of State for:
■ \$25 Filing Fee	S55 Filing Fee & Certified Copy
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee
rananassee, fl 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



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SECRETARY OF STATE
FLORIDA DEPARTMENT OF STATE LAHASSEE. FL
DIVISION OF CORPORATIONS

## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

		as it appears on the records of the Florida Department
of State is:		·
2. The Florida doc	ument/registration number	r assigned to this limited liability company is:
£21000140368		
3. The date this mo	ember/manager withdrew/	resigned or will withdraw/resign is:
Edwin Aguayo		hereby withdraw/resign as a
(Print N	lame of Person Resigning)	, hereby withdraw/resign as a
CFO		
	(Print Title)	<del>-</del> '
of this limited lia resignation in wr		the limited liability company has been notified of my
Edwin J. Ag	uayo	
Signature of D	issociating Member or Re	signing Manager
Filing Fee:	\$25.00 (Required)	
-	\$30.00 (Optional)	