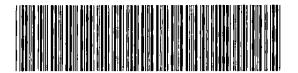
L21000170796

(Requeste	or's Name)		
(Address)			
(Address)			
(City/State	e/Zip/Phone #)		
PICK-UP	WAIT MAIL		
(Business	Entity Name)		
(Docume	nt Number)		
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			
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COVER LETTER

TO: Registration Section Division of Corporations	
Off Limit Investments LLC SUBJECT:	
(Name of Limited	Liability Company)
The enclosed member, resignation or dissociation	on and fee(s) are submitted for filing.
Please return all correspondence concerning this	s matter to:
Edwin Abreu	
(Contact Person)	
Off Limit Investments LLC	
(Firm/Company)	
1613 Amaryllis Circle	
(Address)	
Orlando, Fl. 32825	
(City/State and Zip Code)	<u></u>
For further information concerning this matter, p	olease call:
Edwin Abreu	321 217-6003
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to th ☐ \$25 Filing Fee	ne Florida Department of State for: 8 S55 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

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

(Pursuant to 605.0216, Florida Statutes)

	e limited liability company as		-
2. The Florida doc L21000170796	ument/registration number a	ssigned to this limited li	ability company is:
3. The date this me	ember/manager withdrew/res	igned or will withdraw/i	resign is:
4. I, Danely Abreu, hereby withdraw/resign as a, hereby withdraw/resign as a		resign as a	
Manager	and of a cross cross, sing,		
	(Print Title)		
of this limited lia resignation in wr	bility company and affirm th	e limited liability compa	any has been notified of my
Denly.	Ub -		2023 O
/ Signature of D	issociating Member or Resig	ning Manager	9 IL 2023 OCT 27
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		ED M 9: C