## L21000209753

(Red	questor's Name)	)
(Add	dress)	
·	ŕ	
(Add	dress)	
(City	//State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Na	me)
(Doc	cument Number	)
Certified Copies	Certificate	s of Status
Special Instructions to F	Filing Officer:	
	Office Use Or	nlv



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09/10/21--01015--013 \*\*50.00



## **COVER LETTER**

TO:	Registration Section		1
	Division of Corporations		
SUBJ	PLATINVEST, LLC.		
	(Name of Lim	ited Liability Co	ompany)
The e	nclosed member, resignation or dissoci	ation and fee(	(s) are submitted for filing.
Please	e return all correspondence concerning	this matter to	:
IAN-II	LLYCH MARTINEZ, ESQ.		
	(Contact Person)		_
BELL	O & MARTINEZ, PLLC.		
	(Firm/Company)	<del></del>	<del>_</del>
2850 [	DOUGLAS ROAD, SUITE 303		
	(Address)		_
CORA	L GABLES FL 33134		
	(City/State and Zip Code)		<del>_</del>
For fu	orther information concerning this matter	er, please call	:
IAN II	LLYCH MARTINEZ	305 at (	442-79 <b>7</b> 0
	(Name of Contact Person)	· · · · · · · · · · · · · · · · · · ·	e & Daytime Telephone Number)
Enclø	sed please find a check made payable to	o the Florida	Department of State for:
	5 Filing Fee		g Fee & Certified Copy
	Mailing Address: Registration Section		Street Address: Registration Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327		The Centre of Tallahassee
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810
	,		Tallahassee, FL 32303

CR2E079 (2/14)



## 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)

	limited liability company as		records of the Florida Department
2. The Florida doc: L21000209753	ument/registration number as	signed to this limit	ted liability company is:
3. The date this me	ember/manager withdrew/resi	gned or will withd	09/01/2021 Iraw/resign is:
4. I, MICHELL GUIZ		, hereby withd	draw/resign as a
(Print A AMBR	lame of Person Resigning)		
-	(Print Title)		
of this limited lia resignation in wr		e limited liability co	company has been notified of my
Signature of D	ssociating Member or Resign	ning Manager	2021
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		SEP 10 AH 11:31

CR2E079 (2/14)