## LZ1000427352

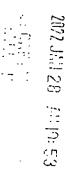
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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01/28/22--01025--019 ++25.00



## COVER LETTER ...

TO: Registration Section Division of Corporations Amicis International, LLC SUBJECT: (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Veronica Lacayo (Contact Person) Amicis International, LLC (Firm/Company) 8950 SW 74th Ct., Suite 2201 (Address) Miami, FL 33156 (City/State and Zip Code) For further information concerning this matter, please call: Veronica Lacayo 305 767-2977 (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: ■ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy Mailing Address: Street Address: Registration Section 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



## 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 is International, LLC		ls of the Florida Department	
2. The Florida doci	ument/registration number ass	signed to this limited lia	ability company is:	
3. The date this me	mber/manager withdrew/resig	gned or will withdraw/r	resign is:	
4. I, Diana M. Mora  (Print Name of Person Resigning)		, hereby withdraw/	_, hereby withdraw/resign as a	
Manager				
	(Print Title) bility company and affirm the iting.	limited liability compa	any has been notified of my	
Signature of Di	ssociating Member or Resign	ing Manager	97.5. Vr 2802	
_	\$25.00 (Required) \$30.00 (Optional)		1128 13	