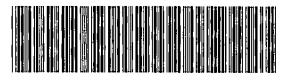
121000 447396

(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:

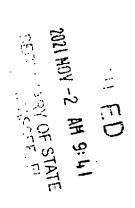
Office Use Only

A. RIVERS
NOV 1 8 2021



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COVER LETTER

TO: Registration Section Division of Corporations	. •
Top of the world investments lle	
SUBJECT: (Name of	f Limited Liability Company)
The enclosed member, resignation or dis	ssociation and fee(s) are submitted for filing.
Please return all correspondence concern	ning this matter to:
Fabrizio Cacciatore	
(Contact Person)	
Top of the world investments lle	
(Firm Company)	
9341 SW 84th Ave	
(Address)	
Miami FL 33156	
(City/State and Zip Code)	
For further information concerning this	matter, please call:
Fabrizio Cacciatore	212 5188829 at ()
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made pay ■ \$25 Filing Fee	yable to the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, 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)

The name of the limited liability company as it appears on the re of State is: Top of the world investments lie	•
2. The Florida document/registration number assigned to this limite L21000447396	ed liability company is:
3. The date this member/manager withdrew/resigned or will withdr	
4. I. Annual Context	
(Print Title) of this limited liability company and affirm the limited liability coresignation in writing.	ompany has been notification my
Auror Gomes (C) 14, 2021 10 25 EDTI Signature of Dissociating Member or Resigning Manager	Oct 24, 2021 = 9. =
Filing Fee: \$25.00 (Required)	

Certified Copy: \$30.00 (Optional)