122000071487

	1
(Requestor's Na	ime
(Address)	-
(Address)	
(Addiess)	
(City/State/Zip/F	Phone #)
PICK-UP WAIT	MAIL
(Business Entity	(Name)
(======================================	,
(Document Num	nper)
Certified Copies Certifie	ates of Status
Special Instructions to Filing Office	
Special instructions to Filling Office	
Office Us	e Only



700395484697

19/17/22--01938--007 **50.00

The Tables of the Asset of the

5077 OCT 17 PM 12: 0

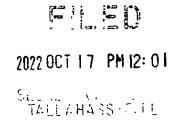
COVER LETTER

TO: Registration Section
Division of Corporations

CR2E079 (2/14)

INVERSIÓN SUBJECT:	ES FRANYEL LLC		
	(Name of Limited I	Liability Com	pany)
The enclosed member, r	esignation or dissociation	n and fee(s)	are submitted for filing.
Please return all corresp	ondence concerning this	matter to:	
ORTEGANO. BLADIMIR X	v1		
(0	ontact Person)		
N/A			
(F	irm/Company)		•
2610 NW 84TH AVE APT 3	08DORAL, FL 33122		
	(Address)		
MIAMI FLORIDA			
(City/	State and Zip Code)		
For further information	concerning this matter, p	lease call:	
ORTEGANO, BLADIMIR	vl at (305	5464378
(Name of Cont	act Person) (Area Code	& Daytime Telephone Number)
Enclosed please find a d ■ \$25 Filing Fee	heck made payable to the		epartment of State for: Fee & Certified Copy
Mailing Address: Registration Sect Division of Corp P.O. Box 6327 Tallahassee, FL	porations		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)

1. The name of the limite	d liability company as it appears on the records of the Florida Department
of State is:	ES FRANYEL LLC
2. The Florida document L22000071487	registration number assigned to this limited liability company is:
3. The date this member/	manager withdrew/resigned or will withdraw/resign is: 10-10-2022
ORTEGANO. BLADIN 4. I,	
MGR	
resignation in writing.	company and affirm the limited liability company has been notified of my
Signature of Dissocia	thig Member or Resigning Manager
١	5.00 (Required) 0.00 (Optional)