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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Aim Alliance Group LLC (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:
Dominic Balderas (Contact Person)
Ain Alliance Group LLC (Firm/Company)
6020 SW 24th PL Apt. 307
Davie, FL 33314 (City/State and Zip Code)
For further information concerning this matter, please call:
Dominic Balderas at (219) 678-1330 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  \$\sum{15}\$ \$\frac{1}{2}\$ \$\frac
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, Fl. 323142415 N. Monroe Street, Suite 81

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	limited liability company as it appears on the records of the Florida Department
of State is: A	m Alliance Group LLC
2. The Florida docu	ment/registration number assigned to this limited liability company is:
L22000	115344
3. The date this men	mber/manager withdrew/resigned or will withdraw/resign is: 07/15/24
4. I, Fernance	hereby withdraw/resign as a me of Person Resigning)
Manag	Print Title)
of this limited liab resignation in writ	ility company and affirm the limited liability company has been notified of my ling.
Signature of Dis	sociating Member or Resigning Manager
Filing Fee:	
Certified Copy:	\$30.00 (Optional)