LZZ000161104

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
J. HORNE		
AUG 1 3 2022		

Office Use Only



06/03/22--01013--027 **55.00

FILED
2022 JUNI -3 PH 1:55
SECRETARY OF CALL
AND SEED, FRANCE

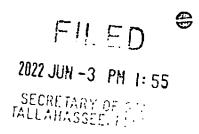
Ø

COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: AL TOQUE, LLC	
(Name of Limited L	iability Company)
The enclosed member, resignation or dissociation	and fee(s) are submitted for filing.
Please return all correspondence concerning this r	matter to:
JONATHAN R. RIVERA RIVERA	
(Contact Person)	
AL TOQUE, LLC	
(Firm/Company)	
6094 WESTGATE DR, APT 101	
(Address)	
ORLANDO, FL 32811	
(City/State and Zip Code)	
For further information concerning this matter, ple	ease call:
JONATHAN R. RIVERA RIVERA at (787) 528-5132
(Name of Contact Person) (A	Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the ☐ \$25 Filing Fee ☑ 5	-
Li \$25 riing rec W.	\$55 Filing Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section Division of Corporations	Registration Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303







DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limit	ed liability company as it appears on the records of the Florida Department
of State is: AL TOQU	E, LLC
2. The Florida document	/registration number assigned to this limited liability company is:
L22000161104	
3. The date this member.	/manager withdrew/resigned or will withdraw/resign is: 05/13/2022
4. 1, LUIS D. LUGO AL (Print Name of	ERS, hereby withdraw/resign as a **Terror Resigning**
AUTHORIZEI (Print	
of this limited liability resignation in writing.	company and affirm the limited liability company has been notified of my
Signature of Dissocia	nting Member or Resigning Manager
_	25.00 (Required) 60.00 (Optional)