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TO:	Registration Section	
	Division of Corporations	
SUBJ	INVERSIONES MASTRANTO 20:	21 LLC
•		mited Liability Company)
The e	nclosed member, resignation or dissoc	ciation and fee(s) are submitted for filing.
Please	e return all correspondence concerning	g this matter to:
MIRE	LVI G ROJAS URBANEJA	
	(Contact Person)	
INVE	RSIONES MASTRANTO 2021 LLC	
	(Firm/Company)	
10931	NW 42ND CT	
	(Address)	
SUNR	ISE, FL, 33351	
	(City/State and Zip Code)	
For fu	arther information concerning this man	tter, please call:
MIRE	LVI G ROJAS URBANEJA	929 4849708 at ()
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
	sed please find a check made payable 5 Filing Fee	to the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy
= 34	of ming rec	_ 333 Thing Fee co 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 it ap	pears on the records of the Florida Depar	rtmen
2. The Florida doct	ument/registration number assign	ed to this limited liability company is:	
3. The date this me	mber/manager withdrew/resigned	I or will withdraw/resign is:	
4. I, URBANEJA, GU	JSTAVO A 'ame of Person Resigning)	, hereby withdraw/resign as a	
MGR	une of tessor resigning)		
	(Print Title)		
of this limited lia resignation in wr		nited liability company has been notified	of my
Gustand W	Lefunda .	· · · · · · · · · · · · · · · · · · ·	2822 Gul
Signature of D	Moonly) . issociating Member or Resigning	Manager	<u>-</u>
			ÇO
	\$25.00 (Required)	: 	- D
Certified Copy:	\$30.00 (Optional)	c -	<u>.</u>