## L22000472472

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## COVER LETTER

Registration Section TO: Division of Corporations Comercializadora Giorgio LLC SUBJECT: (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: Carola Olses (Contact Person) Cales W LLC (Firm/Company) 1025 E Hallandale Beach Blv Ste 15 # 921 (Address) Hallandale Beach Fl 33099 (City/State and Zip Code) For further information concerning this matter, please call: Carola Oises (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee Street Address: Mailing Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

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 l	imited liability company as it appears on the records of the Florida Department
	cializadora Giorgio LLC
2. The Florida docu	ment/registration number assigned to this limited liability company is:
L22000472472	
3. The date this mer	mber/manager withdrew/resigned or will withdraw/resign is: November 23, 2022
Carola Olses	, hereby withdraw/resign as a
(Print No	, hereby withdraw/resign as a mee of Person Resigning)
Member/Manager	
of this limited liab resignation in wri	
-	ssociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)