123000170226

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COVER LETTER

Registration Section

TO:

Division of Corporations INVESTMENT G11, 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: DAVID F. ROBERTS, ESQ. (Contact Person) DAVID F. ROBERTS, P.A. (Firm/Company) 1775 WASHINGTON AVE. PH3 (Address) MIAMI BEACH, FLORIDA 33139 (City State and Zip Code) For further information concerning this matter, please call: DAVID F. ROBERTS 305 (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: ■ \$25 Filing Fee ☐ \$55 Filing Fee & 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)

	ocument/registration number	assigned to this limited liability company is:	
L23000170226			
3. The date this r	nember/manager withdrew/re	signed or will withdraw/resign is: OCTOBER 3, 2023	
4. I. ORGE ELIECER RANGEL JARA (Print Name of Person Resigning)			
	Name of Person Resigning)		
MANAGER			
	(Print Title)		
of this limited li resignation in w	•	ne limited liability company has been notified of my	ı
16 Pauc	EXON		
Signature of D	issociating Member or Resig	ning Manager	
Filing Fee:	\$25.00 (Required)	ZOZ3 O FĂLLA	
	\$30.00 (Optional)	2029 OCT 13 AM ALLAHASSEE.F	