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(Requestor's Name)
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## **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: AN	AMAZINGLY REAL LLC		
_	(Name o	f Limited Liability C	ompany)
The enclosed m	ember, resignation or dis	ssociation and fee	(s) are submitted for filing.
Please return all	correspondence concern	ning this matter to	<b>)</b> :
ALEJANDRA BIE	ENERT BARBERAN		
<u> </u>	(Contact Person)		_
AMAZINGLY RE	AL LLC		
	(Firm/Company)	·	<u></u>
5876 SW 77 TH T	ER		
	(Address)		<del></del>
SOUTH MIAMI, F	FL, 33143		
	(City/State and Zip Code)		
For further infor	rmation concerning this	matter, please cali	l:
ALEJANDRA BIE	ENERT BARBERAN	305 at (	6329725
(Name	e of Contact Person)		le & Daytime Telephone Number)
Enclosed please	find a check made paya	ble to the Florida	Department of State for:
■ \$25 Filing Fe			ng Fee & Certified Copy
Mailing A	.ddress:		Street Address:
	tion Section		Registration Section
	of Corporations		Division of Corporations
P.O. Box	c 6327		The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E079 (2/14)

Tallahassee, FL 32314



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## FLORIDA DEPARTMENT OF STATEMHASSEE, FLORIDA 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 appears on the records of the Florida Departmen
2. The Florida doc	ment/registration number assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:
och cuo illiato	
MANAGER	
	Print Title)
resignation in wr	
Juglo	Water
Signature of D	ssociating Member or Resigning Manager
•	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)