

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : TRUST PAY CORPORATION
Account Number : T20140000092
Phone : (786) 520-6788
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**LLC DISSOLUTION OR WITHDRAWAL
LBR VIAGENS E EVENTOS LTDA - ME, LLC**

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ALLIANCE FLORIDA

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY
FOR
LBR VIAGENS E EVENTOS LTDA - ME, LLC

FIRST: The name of a Limited Liability Company is: **LBR VIAGENS E EVENTOS LTDA - ME, LLC**

SECOND: Jurisdiction of its Organization is: **BRAZIL.**

THIRD: Date registered with Florida Department of State: **04/06/2016.**

FOURTH: Document Number assigned: **M16000002877**

This limited liability company is withdrawing its certificate of authority in this state.

Dated: **June 13, 2016.**

Signature


(Signature of authorized representative)

**BRUNO OLIVEIRA LOEPERT
MANAGER MEMBER**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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