## <u>L08000085176</u>

(Re	questor's Name)	
, (Ad	dress)	
bA)	dress)	
(Cit	ty/State/Zip/Phone	<del>=</del> #)
PICK-UP	☐ WAIT	MAIL
- (Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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FEB LA 2012 J. HARRIS

## **COVER LETTER**

TO: Registration Section

Tallahassee, Florida 32301

CR2E079 (2/14)

Division of Corporations							
SUBJECT: New York Land Acquisitions L.L. (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:							
Minoo Sadeghian-Farahani (Contact Person)							
New York Land Acquisitions L.L.C. (Firm/Company)							
9 LANGLEY LA							
(Address)							
CLD WESTBURY NY 11568 (City/State and Zip C6de)							
For further information concerning this matter, please call:							
Minoo S. Farahavi at (516) 697-7780  (Name of Contact Person) (Area Code & Daytime Telephone Number)							
Enclosed please find a check made payable to the Florida Department of State for:  \$\sum_{2}\$ \$25 \text{ Filing Fee} \sum_{55}\$ \text{ Filing Fee & Certified Copy}\$							
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, Florida 32314							



## 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 lir	nited liability company	as it appears on the record	ds of the Florida	a Dep	artme	ent
of State is: <u>Ne</u>	w york land	AGUSTIONS 1	LC			
2. The Florida docum	ent/registration number	r assigned to this limited li	ability compan	y is:		
L08000	085176	·	Feb	•		
3. The date this members	ber/manager withdrew/	resigned or will withdraw/	resign is: 2	<u> 10</u>	<u> </u>	8
4.1, SABRI	NA FARA ne of Person Resigning)	HAUInereby withdraw	/resign as a		,	
MGP	rint Title)					
of this limited liabil resignation in writing		the limited liability comp	any has been no	otified	l of n	ıy
Signature of Disse	ociating Member or Re	signing Manager	; ;	Term	2018 FES 12	EMATE TO STATE OF THE STATE OF
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		;	fs.	3. 3. 6.	4