L14000152729

| · |
|--|
| (Requestor's Name) |
| • |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| · |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (,,,, |
| (Document Number) |
| (20036) |
| Certified Copies Certificates of Status |
| Germinal Germina Germina Germina Germina Germinal Germinal Germinal Germina |
| |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |
| |
| |
| <u> </u> |

Office Use Only



400309202984

03/02/18--01020--014 **25.00

B FIGUEROA MAR 05 2018

COVER LETTER

Registration Section

TO:

| Division of Corporations |
|--|
| SUBJECT: 123 SUNLITE LLC (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: |
| Lourdes Abalia, Esq. (Contact Person) |
| Tapanes Law PA (Firm/Company) |
| 990 Biscayres Blvd. # 0903 (Address) |
| Miani, FL 33132 (City/State and Zin Code) |
| For further information concerning this matter, please call: |
| |
| (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| Enclosed please find a check made payable to the Florida Department of State for: \$\sum{\$\sum{\$\text{S25}\$ Filing Fee}}\$\$ \$\sum{\$\text{\$\text{Certified Copy}}\$\$ |
| |

MAILING ADDRESS:

Division of Corporations

Tallahassee, Florida 32314

Registration Section

P.O. Box 6327

CR2E079 (2/14)

Registration Section

Clifton Building

Division of Corporations

2661 Executive Center Circle

Tallahassee, Florida 32301

STREET/COURIER ADDRESS:



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 limited liability company as it appears on the records of the Florida Department |
|--|
| of State is: 123 SUNLITE, LLC |
| 2. The Florida document/registration number assigned to this limited liability company is: |
| L14000152729 |
| 3. The date this member/manager withdrew/resigned or will withdraw/resign is: $2-12-18$ |
| 4. I, THOMAS CHEHADI hereby withdraw/resign as a (Print Name of Person Resigning) |
| MGR2 (Print Title) |
| of this limited liability company and affirm the limited liability company has been notified of my resignation in writing. |
| - chehadi |
| Signature of Dissociating Member or Resigning Manager |

\$25.00 (Required)

SECRETARY OF STATE
DIVISION OF CORPORATIONS