## P13000100297

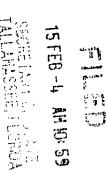
(Re	equestor's Name)	<u></u>
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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C. CARROTTIERS

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: LT 103 Aventura One Inc (Name of Corporation)
DOCUMENT NUMBER: P13000100297
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Samuel Strauch (Name of Person)
(Name of Firm/Company)
1680 Michigan Avenue, Suite 1024  (Address)
Miami Beach, FL 33139 (City/State and Zip Code)
For further information concerning this matter, please call:
Samuel Strauch at (305) 6731160 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E044 (05/13)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

<sub>I,</sub> Samuel Strauch	, hereby resign as Manager	
1,	Title)	
of LT 103 Aventura C		
P13000100297  (Document Number, if known)	, a corporation organized under the laws of the State of	
Florida	// //	
	(Signature of resigning officer/director)	
	FILING FEE IS \$35.00	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Make checks payable to Florida Department of State and mail to: