216000013134

(Re	questor's Name)	<u> </u>
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phor	ie #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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2015 SEP 26 D 3-31

D. BRUCE SEP 28 2016

COVER LETTER

Division of Corporations	
SUBJECT: Palmetto Road Estates 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:	
Susan Wettergreen (Contacherson)	
Palmetto Road Estates LLC (Firm/Company)	
13611 S. Dixie Hwy #416	Ziiii SEP
Miami FC 33176 (City/State and Zip Code)	23 70
For further information concerning this matter, please call:	بب <u>س</u>
Susan Wettergreen at (305) 298 7850 (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: \$25 Filing Fee \$\sum \\$55 Filing Fee & Certified Copy	

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

CR2E079 (2/14)

TO:

Registration Section

MAILING ADDRESS:

Registration Section Division of Corporations 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 limited liability company as it appears on the records of the Florida Department
of State is: Palmetto Road Estates LLC.
2. The Florida document/registration number assigned to this limited liability company is:
L16000013134
3. The date this member/manager withdrew/resigned or will withdraw/resign is: $\frac{9/19/2016}{2016}$
4. I, Pablo J. Martinez, hereby withdraw/resign as a (Print Name of Person Resigning)
Manages (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing. Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)