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Certified Copies	_ Certificates	of Status
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TO:

CR2E079 (2/14)

Registration Section Division of Corporations

SUBJECT: AFFILIATED REALTY GROUP, 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: Barry G. Segal (Contact Person) Barry G. Segal, P.A. (Firm/Company) 3096 Cardinal Drive, Suite 2C (Address) Vero Beach, FL 32963 (City/State and Zip Code) For further information concerning this matter, please call: at (_____) 567-5552 (Area Code & Daytime Telephone Number) Barry G. Segal (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: ■ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301





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)

	limited liability company as it appears on the records of the Florida Department
2. The Florida docu L0300002523	ment/registration number assigned to this limited liability company is:
	mber/manager withdrew/resigned or will withdraw/resign is: Duly 23, 2019 cello , hereby withdraw/resign as a ame of Person Resigning)
Managing Me	·
	(Print Title) bility company and affirm the limited liability company has been notified of my itimy.
	ssociating Member or Resigning Manager
	\$25.00 (Required) \$30.00 (Optional)