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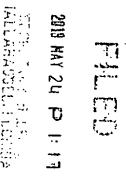
(Requestor's Name)				
(Ad	dress)			
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PICK-UP	MAIT	MAIL MAIL		
(Business Entity Name)				
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COVER LETTER

TO: Registration Section Division of Corporations				
PREMIER HOMES C	 F SOUTH FLORIDA, LLC 			
(Name of Li	nited Liability Company)			
The enclosed member, resignation or dissociation	iation and fee(s) are submitted for filing.			
Please return all correspondence concerning	this matter to:			
Robert J Lodge				
(Contact Person)				
PREMIER HOMES OF SOUTH FLO	 DRIDA, LLC 			
(Firm/Company)				
185 Plantation Shores Drive				
(Address)				
Islamorada, FL 33070				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Robert J Lodge	305 308-2363			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed please find a check made payable \$\Bigsim \$25\$ Filing Fee	to the Florida Department of State for: \$\square\$\square\$ \$\\$55 Filing Fee & Certified Copy			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			

CR2E079 (2/14)



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 a	s it appears on the records of the F	lorida D	epartmen
of State is:	PREMIER HOMES OF S	OUTH FLORIDA, LLC		
2. The Florida doc L030000		assigned to this limited liability cor	npany is	:
3. The date this me	:mber/manager withdrew/re	signed or will withdraw/resign is: _	12-31	1-2018
Robert K Orr		, hereby withdraw/resign as	1	
	lame of Person Resigning)			
MGR				
	(Print Title)			
of this limited lia resignation in wr	· · · · · · · · · · · · · · · · · · ·	he limited liability company has be		ied of my
Signature of Di	issociating Member or Resi	gning Manager	MAX	Calcing C
_	\$25.00 (Required) \$30.00 (Optional)	State Land	2819 MAY 24 P 1: 1:7	And the second