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(Requestor's Name)				
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(C	ity/State/Zip/Phone #)			
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				
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Office Use Only



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COVER LETTER

то:	Registration Section Division of Corporations			
SUBJ	T: REAL ESTATE INVESTMENT VENTURES, LLC			
	(Name of Limited Lia	pility Company)		
The en	nclosed member, resignation or dissociation a	nd fee(s) are submitted for filing.		
Please	return all correspondence concerning this ma	atter to:		
FABI	OLA SANTIAGO .			
	(Contact Person)			
PRIN	CE CPA GROUP			
	(Firm/Company)			
9161	NARCOOSSEE RD. SUITE 202			
	(Address)			
ORLA	ANDO, FL 32827			
	(City/State and Zip Code)			
For fur	rther information concerning this matter, plea	se call:		
FABIO	at (07 823-8230		
	(Name of Contact Person) (Ar	ea Code & Daytime Telephone Number)		
	sed please find a check made payable to the F Filing Fee \$5	lorida Department of State for: 5 Filing Fee & Certified Copy		
Registr Division Clifton 2661 E	ET/COURIER ADDRESS: ration Section on of Corporations n Building Executive Center Circle assee, 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	he limited liability company as	it appears on the records of the Florida D	epartment
of State is: RE	EAL ESTATE INVESTMENT	VENTURES, LLC	·
2. The Florida do	ocument/registration number ass	signed to this limited liability company is	s:
L050000021	143	·	
3. The date this r	nember/manager withdrew/resi	gned or will withdraw/resign is:)17
4. I, SCOTT BU	JESCHER	, hereby withdraw/resign as a	
(Prini	Name of Person Resigning)	The state of the s	
MGR			2
 11: 7	(Print Title)	### ### ####	D
of this limited l		e limited liability company has been with	ied f my
Seus	Bushu		
Signature of	Dissociating Member or Resign	ning Manager	
Filing Fee:	\$25.00 (Required)		

Certified Copy:

\$30.00 (Optional)