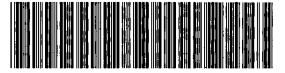
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(Requestor's Name)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
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(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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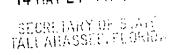
•	stration Section sion of Corporations			
SUBJECT:	CHAVEN INVESTMENTS, L	.LC		
	(Name of Limited Liability Company)			
The enclosed	n member, resignation or dissocia	ation and fee(s)	are submitted for filing.	
Please return	all correspondence concerning t	his matter to:		
Karl M. Sch	nmitz, III, Esq.			
	(Contact Person)		-	
Karl M. Sch	nmitz, III, P.A.			
	(Firm/Company)		•	
701 Enterp	rise Road, E., Unit 502			
	(Address)		•	
Safety Hart	oor, Florida 34695			
	(City/State and Zip Code)		-	
For further in	nformation concerning this matte	r, please call:		
Karl M. Sch	nmitz, III, Esq.	727	450-0778	
(N	ame of Contact Person)	(Area Code	& Daytime Telephone Number)	
Enclosed ple \$25 Filing	ase find a check made payable to g Fee		epartment of State for: Fee & Certified Copy	
Registration Division of C Clifton Build 2661 Execut	Corporations		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

CR2E079 (2/14)

APPRIORES
AND
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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)

	e limited liability company as it appears on the records of the Florida Department AVEN INVESTMENTS, LLC
2. The Florida doc L0500008256	ument/registration number assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is: May 9,204
	DEVELOPMENT GROUP, LLC, hereby withdraw/resign as a
(Print N	Jame of Person Resigning)
MEMBER	
	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting
	and the same of th
Signature of Di	ssociating Member or Resigning Manager
Filing Fee:	
Certified Copy:	\$30.00 (Optional)