

LD7000032952

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

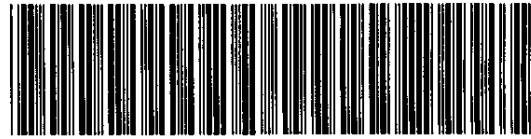
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/28/14--01017--011 **25.00

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14 JUL 23 PM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8-8-14
C.M.

COVER LETTER

FILED
14 JUL 28 PM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO: Registration Section
Division of Corporations

SUBJECT: YEUNG'S REALTY 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:

Queenie YEUNG
(Contact Person)

YEUNG'S REALTY LLC
(Firm/Company)

15425 SW 50 TRIV.
(Address)

MIAMI, FL 33185
(City/State and Zip Code)

For further information concerning this matter, please call:

JOE YEUNG at (305) 776-7881
(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

\$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



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
14 JUL 28 PM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: YEUNG'S REALTY LLC

2. The Florida document/registration number assigned to this limited liability company is: L07000032952

3. The date this member/manager withdrew/resigned or will withdraw/resign is: JUNE 30, 2014

4. I, PUI L YEUNG, hereby withdraw/resign as a
(Print Name of Person Resigning)
MGRM
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

[Signature]
Signature of Dissociating Member or Resigning Manager

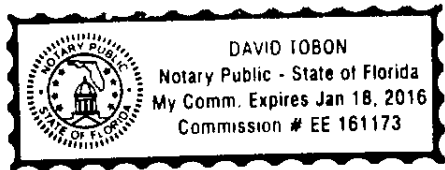
Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

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14 JUL 28 PM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA SHORT-FORM INDIVIDUAL ACKNOWLEDGMENT
F.S. 695.25

State of Florida
County of Miami-Dade }

The foregoing instrument was acknowledged
before me this 22 day
Date
of JULY, 2014,
Month Year
by Pui Lim Yeung,
Name of Person Acknowledging
who is personally known to me or who
has produced Florida
Drugs License
Type of Identification
as identification.



Place Notary Seal Stamp Above

[Signature]
Signature of Notary Public
David Tobon
Name of Notary Typed, Printed or Stamped

Notary Public — State of Florida

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Dissociation or resignation of member, manager

Document Date: 6/30/14 Number of Pages: 2

Signer(s) Other Than Named Above: _____