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Resignation

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Registration Section

TO:

Division of Corporations WISTERIA REAL ESTATE, L.L.C. SUBJECT: (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: RAMON GARCIA (Contact Person) WISTERIA REAL ESTATE, L.L.C. (Firm/Company) 2929 SW 3RD AVE SUITE 310 (Address) MIAMI, FL 33129 (City/State and Zip Code) For further information concerning this matter, please call: **GLADYS PATINO** 338-2333 (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: ■ \$55 Filing Fee & Certified Copy □ \$25 Filing Fee Street Address: **Mailing Address:** Registration Section Registration Section **Division of Corporations Division of Corporations** The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303





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
2. The Florida doc	cument/registration number as	ssigned to this limited liability company is:
3. The date this m	ember/manager withdrew/res	igned or will withdraw/resign is:
4. I, GLADYS C PATINO (Print Name of Person Resigning)		, hereby withdraw/resign as a
(Print) MGR	Name of Person Resigning)	
	(Print Title)	
of this limited lia resignation in w		e limited liability company has been notified of my
Signature of D	Dissociating Member or Resig	ning Manager
	/ /	
	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	