L09000065835

(Re	equestor's Name)	
(Ac	ddress)	
· (Ac	idress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nai	me)
(Dc	ocument Number)	
	·	
Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

Division of Corporations	
SUBJECT: Paradize LLC	
SCBGEC1:	nited Liability Company)
The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning	this matter to:
Jeri Dausey	
(Contact Person)	
(Firm/Company)	
10180 W Bay Harbor Drive	
(Address)	
Bay Harbor Islands, Florida 3315	54
(City/State and Zip Code)	
For further information concerning this matter	er, please call:
Jeri Dausey	at (305) 957-0088
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable t \$25 Filing Fee	o the Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (5/06)



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SECRETARY OF STATE
TALLAHASSEE. FEORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	• • •	it appears on the records of the Florida	Department
of State is: Par	adize LLC		
	ility company was organized	under the laws of:	
Florida			
3. The Florida docu L09000065	•	this limited liability company is:	
		 ·	
4. I, Jeri Dause	у	, hereby resign as a Manager	
(Print No	ame of Person Resigning)	(Print Ti	tle)
of this limited liab resignation in wri		e limited liability company has been no	tified of my
_ Oly O	alder		
Signature of Resi	gning Member, Managing M	ember or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:			