## L110000025823

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## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: Soltilegio Properties LLC (Name of Limited Liability Company)	<del></del>
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to:	
Jania Conesa (Contact Person)	
PiTTconesa 26 @ gmail "Com	
1714 46th STREET	
North Bergen NJ 07047 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Tania Conesa at (201) 923-1237 (Area Code & Daytime Telephone Numb	ber)
Enclosed please find a check made payable to the Florida Department of State for:  \$25 Filing Fee \$\sum \\$55 Filing Fee & Certified Copy	
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee	ę

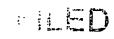
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E079 (2/14)

Tallahassee, FL 32314





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FLORIDA DEPARTMENT OF STATE ALL ARTHURSE, FL DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

	limited liability company as it appears on the records of the Florida Department
of State is: Sc	oltiLegio Properties LLC.
2. The Florida docu	ment/registration number assigned to this limited liability company is:
L11000	0025823
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: $\frac{07/30\cancel{5000}}{\cancel{50000}}$
4. I. Jania (Print No.	hereby withdraw/resign as a hereby withdraw/resign as a
Manag	er/Agent/. (Print Title)
of this limited lial resignation in wri	pility company and affirm the limited liability company has been notified of my iting.
/ Naire	Drieta
Signature of Di	ssociating Member or Resigning Manager
	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)