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#### **COVER LETTER**

Division of Corporations
SUBJECT: USA Investment Properties, 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:
Ternando Sanctez (Contact Person)
US A Investment Properties LLC (Firm/Company)
7215 Monetary Dr Ste#105 (Address)
Orlando Florida 32809 (City/State and Zip Code)
For further information concerning this matter, please call:
Fernando Sanchez at (437) 832-42434 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for \$\frac{\pi}{2}\$\$ \$\frac{\pi}{2}\$\$ \$\$ \$25 Filing Fee \$\text{Certified Copy}\$\$\$ \$\frac{\pi}{2}\$\$\$

#### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

TO: Registration Section

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)



### 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)

1. The name of the	limited liability company as i	t appears on the records of the	Florida Department
of State is:	USA Investment	frogerties, LLC	
2. The Florida docu	ment/registration number ass	igned to this limited liability co	ompany is:
L11 00	00 4 68 09		.,,
3. The date this me	mber/manager withdrew/resig	ened or will withdraw/resign is:	9/22/16
4.1, Shakir	a Sanchez	, hereby withdraw/resign as	2011
(Print N	ame of Person Resigning)		B 8
MG			
(	(Print Title)	The state of the life of the second particles and the second particles and the second	
		limited liability company has l	peen notified of my
resignation in wri	ting		= -
			**
Signature of Di	ssociating Member or Resign	ing Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		