## 1100068868

(Re	equestor's Name)				
(Ad	ldress)				
(Ac	ldress)				
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
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## **COVER LETTER**

Pro: Registration Section Division of Corporations			
SUBJECT: FAM PROP, LLC			
(Name of Limited Liability Con	ipany)		
The enclosed member, resignation or dissociation and fee(s	) are submitted for filing.		
Please return all correspondence concerning this matter to:			
ARCHIE J.RYAN III, ESQ.	_		
(Contact Person)			
RYAN & RYAN LLC			
(Firm/Company)	- 		
700 EAST DANIA BEACH BOULEVARD	- -	<b>6</b>	7
(Address)		元二一	
DANIA BEACH, FL 33004		B-5 2 4 4	
(City/State and Zip Code)	-		
For further information concerning this matter, please call:		in F	
ARCHIE J. RYAN III, ESQ 954	920-2921		
(Name of Contact Person) (Area Code	& Daytime Telephone Number	er)	
Enclosed please find a check made payable to the Florida D  ■ \$25 Filing Fee □ \$55 Filing	Department of State for: Fee & Certified Copy		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327		
2661 Executive Center Circle	Tallahassee, Florida 32314	r	
Tallahassee, Florida 32301	<del>-</del>		

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)

	limited liability company as PROP, LLC	it appears on the records of the Fl	orida Depa	ırtme	n <b>t</b> -•
2. The Florida docu L11000068868	•	ssigned to this limited liability con	npany is:		
, PATRICK A.	GUTIERREZ	igned or will withdraw/resign is:, hereby withdraw/resign as a		16	-
(Print No	ame of Person Resigning)	, nerecy withdrawnessign as c	•		
of this limited liab	ting.	e limited liability company has be	en notified	, mark	у
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)	ning Manager	GUSTA SANTE AVISTANTESOR	6 FEB -5 PH 4: 4	