## 1200000 449(F)

(1	Requestor's Name)	<del></del>		
(Address)				
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(	City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL	•		
(Business Entity Name)				
(Document Number)				
	Certificates of Status			
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## **COVER LETTER**

Registration Section

TO:

CR2E079 (2/14)

**Division of Corporations** Good Life EB5 Advisors LLC . **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: Ernest S. Munzen (Contact Person) **GEM Management** (Firm/Company) 15251 Amberly Drive (Address) Tampa, FL 33647 (City/State and Zip Code) For further information concerning this matter, please call: **Ernest Munzen** (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee STREET/COURIER ADDRESS: **MAILING ADDRESS: Registration Section** Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301



## 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	it appears on the records of the Florida Departmer	ıt
of State is:	d Life EB5 Advisors LLC		
	_	signed to this limited liability company is:	
L1200004426	1		
3. The date this me	ember/manager withdrew/resi	gned or will withdraw/resign is: April 30, 2015	
E 4 O A 4			
(Print N	lame of Person Resigning)	, hereby withdraw/resign as a	
	Manager and Member		
<del></del>	(Print Title)		
of this limited lia resignation in wr		e limited liability company has been notified of my	y
		(D	
Cino	A S. murze		
Signature of Dissociating Member or Resigning		SA 🛣	-1
	\$25.00 (Required)	EE, FL	
Certified Copy:	\$30.00 (Optional)	TAT ON	