L12000075265

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(Address)	
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SECRETARY OF STATE AND SECRETARY OF STATE AND SECRETARY OF STATE AND SECRETARY OF STATE AND SECRETARY OF SECR

C. LEWIS

MAR - 5 2013

EXAMINER

*COVER LETTER

Division of Corporations	
SUBJECT: Value Beach (Name of Limited	Chalets, LLC Liability Company)
The enclosed member, managing member or ma filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
Jason Monsello (Contact Person)	
(Contact Person)	
(Firm/Company)	
PO BOX 480116	
(Audress)	
FT. Lauderdele, FL 3 (City/State and Zip Code)	<u> </u>
For further information concerning this matter, p	lease call:
JASON Monsello at	(<u>954</u>) <u>298-5879</u> (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	e Florida Department of State for: ☐ \$55 Filing Fee &
□ \$25 Filling Fee	Certified Copy
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

CR2E079 (5/06)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



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

1. The name of the	he limited liability company as it appears on the records of the Florida Departm	nent
of State is:	Value Beach Chalets, LLC	 •
2. This limited liab	ability company was organized under the laws of:	
<i>F</i>	ELORIBA.	
3. The Florida doc	ocument/registration number of this limited liability company is:	
	000075265	
4. 1, <i>JASON</i> (Print)	n Morse/o, hereby resign as a Manager ME (Name of Person Resigning), hereby resign as a Manager Me	MBER
of this limited lia resignation in w	iability company and affirm the limited liability company has been notified of writing.	my
Jason	n 7. Morsello	
Signature of Res	esigning Member, Managing Member or Manager	
Filing Fee:		
Certified Conv.	\$30.00 (Ontional)	