# L12000092907

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	<b>⇒</b> #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	<u></u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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TALPREDICTRY OF STATE RIDA

# LLC Member Resign

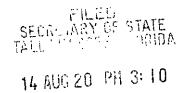
AUG 2 8 2014 T. CARTER

#### COVER LETTER

TO:	_	tration Section ion of Corporations			
SUBJECT:	ECT:	Villas De Tuscany LLC			
50251		(Name of Limited Liability Company)			
The en	closed	member, resignation or dissocia	tion and fee(s	) are submitted for filing.	
Please	return	all correspondence concerning the	his matter to:		
Lisa L	anza,	Esq.		_	
		(Contact Person)			
Melissa P. Lanza, P.A.					
		(Firm/Company)		<del>.</del>	
104 C	rando	on Blvd., Suite 420			
		(Address)		_	
Key B	Biscay	ne, FL 33149			
		(City/State and Zip Code)		_	
For further information concerning this matter, please call:					
Lisa L	_anza		305	361-0997	
	(N	ame of Contact Person)	(Area Code	& Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida Department of State for:  \$\begin{align*} \text{\$\text{25}} \text{ Filing Fee} \text{\$\text{\$\text{Certified Copy}}  \end{align*}					
Registr Division Cliftor 2661 E	ration on of C n Build Execut	OURIER ADDRESS: Section Corporations ding ive Center Circle Florida 32301		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 l	imited liability company as it appears on the records of the Florida Department
of State is: VILL	AS DE TUSCANY #1202, LLC
2. The Florida docu	ment/registration number assigned to this limited liability company is:
L12000009290	<u>7</u> .
3. The date this men	mber/manager withdrew/resigned or will withdraw/resign is: AUG 8, 2014
4. I, EGNACIA I. M (Print Na	MASSEY, hereby withdraw/resign as a me of Person Resigning)
MGRM	Print Title)
of this limited liab resignation in writ	ility company and affirm the limited liability company has been notified of my ting.
Signature of Dis	sociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)