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Requestor's Name))				
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Office Use Only



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16 SEP 22 PM 1:50 DIVISION OF CORPORATIONS

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Del Favero Florida (Name of Limited Liability Com	froger ties LLC
The enclosed member, resignation or dissociation and fee(s)) are submitted for filing.
Please return all correspondence concerning this matter to:	
Laurpen Sevane (Contact Person)	-
(Firm/Company)	-
11047 Castle reagh St.	_
F4 Myers F2 33913 (City/State and Zip Code)	~
For further information concerning this matter, please call:	
Laureen Sevane at (203) 631-1511
(Name of Contact Person) (Area Code) 3 9 Enclosed please find a check made payable to the Florida L	: & Daytime Telephone Number)
\$25 Filing Fee \$55 Filing	g Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, 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 lin							-	nent
of State is:	Del Favero	Ploria	da	Prope	ties	\mathcal{U}		·
2. The Florida docume	ent/registration numb	er assigned	to this l	imited lia	bility com	pany i	s:	
	0102050	··					,)	
3. The date this memb	per/manager withdrev	v/resigned o	or will w	ithdraw/r	esign is: _	9	1/10	<u>'0</u>
4. I, Balbas (Print Nam	a Del Favel e of Person Resigning)	<u>(0</u> ,)	hereby v	vithdraw/i	resign as a			
<u>lland</u>	in Title)	 ·						
of this limited liabil resignation in writin	ity company and affi	rm the limit	ed liabil	ity compa	iny has bee	en not	ified o	f my
Barbara	Dettares					USINE	16 SEP	77
Signature of Disso	ociating Member or I	Resigning M	lanager			<u>e</u>	P 22	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)					DIVISION OF CORPORATIONS	PH -:	ED
• •	(1						50	