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| (Re | equestor's Name) | |
|---|--------------------|-------------|
| (Ad | dress) | |
| (Ad | ldress) | - <u> </u> |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Nar | ne) |
| (Document Number) | | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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R. WHITE

COVER LETTER

| TO: Registration Section |
|---|
| Division of Corporations |
| SUBJECT: EDG Property Securics (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: |
| Teff Webster (Contact Person) |
| EDG Papoy Sovies (Firm/Company) |
| rz S MIAMI Ave (Address) |
| MIAMI FL 33130 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Teff Webster at (305) 767-5096 (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| Enclosed please find a check made payable to the Florida Department of State for: \$\Begin{align*} \Boxed* \$\\$25 \text{Filing Fee} & Certified Copy \end{align*} |
| |

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

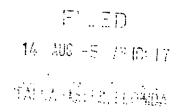
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MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

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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 Departme | nt |
|----------------------|---|----|
| of State is: | EDG Property Services, UC | |
| | neut/registration number assigned to this limited liability company is: | |
| L 12000 | 130884 | |
| 3. The date this men | nber/manager withdrew/resigned or will withdraw/resign is: 8/31/14 | _ |
| | Benga, hereby withdraw/resign as a me of Person Resigning) | |
| Mgmr | Print Title) | |
| | ility company and affirm the limited liability company has been notified of m | ıy |
| | h Bul | |
| Signature of Dis | sociating Member or Resigning Manager | |
| - | \$25.00 (Required) \$30.00 (Optional) | |