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Office Use Only



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S. YOUNG

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SOUTHERN WINDS INVES	STMENTS &	HOLDINGS LLC
(Name of Lin	nited Liability Co	ampany)
The enclosed member, resignation or dissoc	iation and fee	(s) are submitted for filing.
Please return all correspondence concerning	this matter to	:
RICHARD AMENDOLA		
(Contact Person)	_	
SOUTHERN WINDS INVESTMENTS &	HOLDINGS	3
(Firm/Company)	<del>-</del>	<del></del>
18832 SW 77 CT		
(Address)	,	
CUTLER BAY, FL 33157		
(City/State and Zip Code)	<del></del> .	_
For further information concerning this matt	ter, please call	l:
RICHARD AMENDOLA		989-5039 )
(Name of Contact Person)	(Area Coc	le & Daytime Telephone Number)
Enclosed please find a check made payable t  \$25 Filing Fee		Department of State for:  ig Fee & Certified Copy
STREET/COURIER ADDRESS:		MAILING ADDRESS:
Registration Section Division of Corporations		Registration Section Division of Corporations
Clifton Building		P.O. Box 6327
2661 Executive Center Circle		Tallahassee, Florida 32314
Tallahassee, Florida 32301		

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)

SOL		it appears on the records of the F MENTS & HOLDINGS LLC	Norida Departmen	1 <b>1</b>
2. The Florida docu L1300010396	<del>-</del>	signed to this limited liability co.	mpany is:	
SEBASTIAN	MAINELLI	igned or will withdraw/resign is:		
(Print N		, hereby withdraw/resign as		
of this limited lial resignation in wr		e limited liability company has be	19 EEB 20 MI II: 55 TALLEMIASSILE, TLORIDA	
•	\$25.00 (Required) \$30.00 (Optional)			