L/3000/20326

(Re	equestor's Name)	·		
(Address)				
(Ac	ldress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
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(Bu	isiness Entity Nar	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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COVER LETTER

TO: Registration Section
Division of Corporations

CR2E079 (2/14)

Overlook at Grassy Lake P SUBJECT:	artners 3, LL	.C
	mited Liability Co	ompany)
The enclosed member, resignation or dissoc	ciation and fee	(s) are submitted for filing.
Please return all correspondence concerning	g this matter to	:
Jeff Ippoliti, Esq.		
(Contact Person)		
Celebration Law		
(Firm/Company)	. ,	
506 Celebration Ave.		
(Address)		
Celebration, FL 34747		
(City/State and Zip Code)		_
For further information concerning this mat	ter, please call	1:
Jeff Ippoliti, Esq.	407	566-0001
(Name of Contact Person)	at ((Area Coo	de & Daytime Telephone Number)
Enclosed please find a check made payable		=
\$25 Filing Fee	□ \$55 Filii	ng 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
Tallahassee, Florida 32301		



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)

Ove	limited liability company as rlook at Grassy Lake Partr	ners 3, LLC	the Florida Department
2. The Florida docu L1300012032	ument/registration number as 6	signed to this limited liabilit	ty company is:
Celebration I	mber/manager withdrew/resi _aw, PA	_	
4. 1,(Print N Manager	ame of Person Resigning)	, hereby withdraw/resig	gn as a
of this limited lial resignation in wr	bility company and affirm the iting. Sociating Member or Resign		nas been notified of my
Signature of Di	ssociating Member or Resign	ning Manager	79 3 JM T
	\$25.00 (Required) \$30.00 (Optional)		M -6 PM 4: C