

L 14 00000 7069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

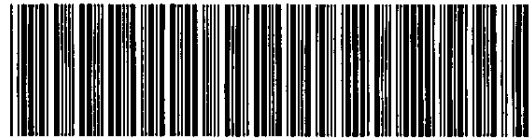
(Business Entity Name)

(Document Number)

Certified Copies ~~\_\_\_\_\_~~    Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500263409975

10/02/14--01024--017 \*\*55.00

FILED  
14 OCT -2 PM 4:51  
SOUTH CAROLINA  
FILING OFFICE

LLC  
Diss./Resign.  
mm

10-14-14

DC



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)

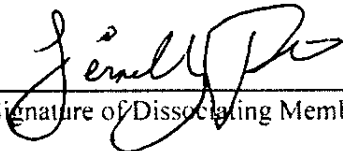
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: LE PALACE ORLANDO, LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L 14000007069

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 9/30/14

4. I, Jineilly Pena, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
Mgmr.  
*(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

FILED  
14 OCT -2 PM 4:51  
TALLAHASSEE, FLORIDA