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| (F | Requestor's Name) | | | | | |
|---|-------------------------|--------|--|--|--|--|
| | | | | | | |
| (Address) | | | | | | |
| | | | | | | |
| (Address) | | | | | | |
| (0 | City/State/Zip/Phone #) | | | | | |
| PICK-UP | ☐ WAIT | MAIL. | | | | |
| (E | Business Entity Name) | | | | | |
| (Document Number) | | | | | | |
| Certified Copies | Certificates of | Status | | | | |
| Special Instructions to Filing Officer: | | | | | | |
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Office Use Only



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SECRETARY OF STATE FALLAHASSEE, FLORIDA

SECRETARY OF STATE
JIVISION OF CORPORATION

15 JUN - 1 AM 3: 43

JUN 0 8 2015

3 MASON

COVER LETTER

| _ | stration Section sion of Corporations | | |
|---------------|--|-------------------|---|
| SUBJECT: | Fine Love Properties, LLC | | |
| | (Name of Limit | ted Liability Con | pany) |
| The enclosed | d member, resignation or dissocia | tion and fee(s) |) are submitted for filing. |
| Please return | all correspondence concerning the | his matter to: | |
| Theresa Fa | alcone | | _ |
| | (Contact Person) | | - |
| Fine Love | Properties LLC | | |
| | (Firm/Company) | | - |
| 15570 Stat | unton Cir | | |
| | (Address) | | - |
| Port Charlo | otte, FL 33981 | | |
| | (City/State and Zip Code) | | • |
| For further i | nformation concerning this matte | r, please call: | |
| Theresa Fa | alcone | 917 at (| 575-0311 |
| (N | Jame of Contact Person) | (Area Code | & Daytime Telephone Number) |
| Enclosed ple | ease find a check made payable to g Fee | | epartment of State for: Fee & Certified Copy |
| STREET/C | OURIER ADDRESS: | | MAILING ADDRESS:≥ |

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

CR2E079 (2/14)

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 323 TADE

FLORIDE

TORING

TO

SECRETARY OF STATE
DIVISION OF CORPORATION



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)

| | limited liability company as Love Properties, LLC | it appears on the records of th | e Florida | Depar | tment |
|---------------------------------------|---|----------------------------------|--------------------------|----------|-----------------------------------|
| 2. The Florida docu | ment/registration number ass | signed to this limited liability | company | is: | |
| <u> L-140</u> | 00039588 | <u></u> . | | | |
| 3. The date this me | mber/manager withdrew/resi | gned or will withdraw/resign | is: | /2015 | i |
| 4. I, Anthony E To | OWNS ame of Person Resigning) | , hereby withdraw/resign | as a | | |
| Member / A | ame of Person Resigning) (Print Title) | | | | |
| of this limited had resignation in wr | | e limited liability company has | s been not | ified o | of my SE |
| Signature of Di | ssociating Member or Resign | ning Manager | SECRETAF ALLAHAS | JUN - | CRETAR SION OF |
| Filing Fee: Certified Copy: | \$25.00 (Required) \$30.00 (Optional) | | RY OF STATE SEE. FLORIDA | AM 3: 43 | LED Y OF STATE CORPORATIONS |