

Florida Department of State  
 Division of Corporations  
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To: Division of Corporations  
 Fax Number : (850)617-6383

From: Account Name : GULATI LAW  
 Account Number : T20130000014  
 Phone : (407)900-5054  
 Fax Number : (407)517-4931

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: Office@GulatiLaw.com

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
 HAVEN ORLANDO, LLC**

Certificate of Status	0
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Corporate Filing Menu

Help

D. SCOTT

JUN 13 2017

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: HAVEN ORLANDO, LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SARAH GULATI, ESQ.

Name of Person

GULATI LAW, P.L.

Firm/Company

479 MONTGOMERY PLACE

Address

ALTAMONTE SPRINGS, FLORIDA 32714

City/State and Zip Code

OFFICE@GULATILAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SARAH GULATI

407

900-5054

at ( )

Name of Person

Area Code

Daytime Telephone Number

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TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &  
Certificate of Status

\$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

\$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 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)

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

2. The Florida document/registration number assigned to this limited liability company is:  
L14000089497

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 6/11/2017

4. I, WILLIE PAREDES, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

AMBR  
*(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)

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