(Re	equestor's Name)			
(Ac	ldress)			
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(,	. 			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
	ocument Number)			
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Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Deep Walk Hotel & Golf Club LLC (Name of Limited Liability Company)				
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to:				
Mandy Calara (Contact Person)				
Decomalk Hotel & Frolf Club (Firm/Company)				
928 Orean Drive, Mani Beach, Fr 33139 (Address)				
Miani Beach, Fl 33139 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Mandy Calara at (312) 608-4530 (Name of Contact Person) (Area Code & Daytime Telephone Number)				
Enclosed please find a check made payable to the Florida Department of State for: \$\sumset\$ \$\\$\\$25 \text{ Filing Fee}\$\$\$ \$\sumset\$ \$\\$\\$55 \text{ Filing Fee & Certified Copy}\$\$\$				
STREET/COURIER ADDRESS:MAILING ADDRESS:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsClifton BuildingP.O. Box 63272661 Executive Center CircleTallahassee, Florida 32314				

CR2E079 (2/14)

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)

1. The name of the	limited liability company as	it appears on the records of	the Florida Department
of State is:	eco Walk Hotel	& Golf Club, LLC	
2. The Florida docu	ument/registration number as	signed to this limited liabili	ty company is:
<u></u>	000143735	·	
3. The date this me	mber/manager withdrew/resi	igned or will withdraw/resig	n is: <u>12/10/18</u>
4. I, Nearcy (Print N	Calaya ame of Person Resigning)	, hereby withdraw/resig	gn as a
Man	Q QCY		
of this limited lial resignation in wr	oility company and affirm the	e limited liability company l	has been notified of my
resignation in wr	ung.		201 7AE 75E
	Calara		FIL 2010 DEC 20 SECRETARY ALLAHASSE
Signature of D	ssociating Member or Resign	ning Manager	CD.
Filing Fee	\$25.00 (Required)		AMII: 3. OF STATE OF FLORID
_	\$30.00 (Optional)		ည်း မွ