44000152729

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MAR () 5 26'5 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: 123 SUNLITE LCC (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:					
Lourdes Abalia, Esq. (Contact Person)					
Tapanes Law PA (Firm/Company)					
990 Biscayne Blud # 0903					
(Address)					
Miani FL 33132 (City/State and Zip Code)					
For further information concerning this matter, please call:					
Lovales Abalia at 305, 514-0985 (Name of Contact Person) (Area Code & Daytime Telephone Number)					
(Name of Contact Person) (Area Code & Daytime Telephone Number)					
Enclosed please find a check made payable to the Florida Department of State for: \$\sum \\$25 \text{ Filing Fee } \sum \\$55 \text{ Filing Fee & Certified Copy}\$					
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, 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 o	of the Florida Department
of State is:	123 SUNLi	TE, LLC	·
2. The Florida docu	iment/registration number as	ssigned to this limited liabi	ility company is:
L14000	52729		
3. The date this me	mber/manager withdrew/res	igned or will withdraw/res	ign is: 2-12-18
	WAF ame of Person Resigning)		
MGI	(Print Title)		
	oility company and affirm th	e limited liability company	y has been notified of my
	AS		7 22
Signature of Di	ssociating Member or Resig	ning Manager	2018 HAR
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		R-2 PHI2: 5