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COVER LETTER

Registration Section TO: Division of Corporations Mirai Properties LLC SUBJECT: (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: Marcos Tadashi Nakada (Contact Person) Mirai Properties LLC (Firm/Company) 2719 Center Court Dr. (Address) Weston, FL 33332 (City/State and Zip Code) For further information concerning this matter, please call: 309-8259 954 Marcos Tadashi Nakada (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee Mailing Address: Street Address: Registration Section Registration Section **Division of Corporations Division of Corporations** The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303



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SECRETARY OF STAFF

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 I. Mirai Properties LLC. of State is:	Department
2. The Florida document/registration number assigned to this limited liability company i L14000181498	s:
3. The date this member/manager withdrew/resigned or will withdraw/resign is:	
Joel Tejada 4. I,, hereby withdraw/resign as a	
Manager	
of this limited liability company and affirm the limited liability company has been noti resignation in writing.	fied of my
Signature of Dissociating Member or Resigning Manager	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	