UM 000 193833

(Requestor's Name)	
(Address)	
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, , , , , ,	
PICK-UP WAIT MA	AIL
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Special Instructions to Filing Officer:	





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SEGRETARY OF STATE

COVER LETTER

TO:	Registration Section						
	Division of Corporations						
SUBJI	1460 PLEASANT HILL, LLC	;					
		(Name of Limited Liability Company)					
The en	nclosed member, resignation or dissoci	ation and fee(s)) are submitted for filing.				
Please	return all correspondence concerning	this matter to:					
Mohe	eidin Hanafi						
	(Contact Person)		-				
	(Firm/Company)		-				
20 OI	d Sugar Mill Lane						
	(Address)		•				
St. Cl	oud, FL 34769						
	(City/State and Zip Code)		-				
For fu	rther information concerning this matt	er, please call:					
Mohe	eidin Hanafi	407	301-5262				
	(Name of Contact Person)	(Area Code	& Daytime Telephone Number)				
	sed please find a check made payable t Filing Fee		epartment of State for: Fee & Certified Copy				
	ET/COURIER ADDRESS:		MAILING ADDRESS:				
	ration Section on of Corporations		Registration Section Division of Corporations				
	n Building		P.O. Box 6327				
2661 E	Executive Center Circle assee, Florida 32301		Tallahassee, Florida 32314				

CR2E079 (2/14)



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)

	PLEASANT HILL, LLC		cords of the	Florida Department
2. The Florida docu	ment/registration number	assigned to this limite	ed liability co	ompany is:
3. The date this me	mber/manager withdrew/re	esigned or will withdr	aw/resign is:	09/01/2017
4. I. Sahar Hanaf				
MGR				
	(Print Title)			
of this limited lial resignation in wri	pility company and affirm ting.	the limited liability co	ompany has t	neen milled of my Not 11 OCT 11
Signature of Di	ssociating Member or Res	igning Manager	•	Y OF S
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			Sa IAIL IRIDA