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## **COVER LETTER**

TO: Registration Section Division of Corporations		
2		
SUBJECT: Latitude 182, LLC		
(Name of Lim	ited Liability Cor	mpany)
The enclosed member, resignation or dissoci	ation and fee(s	s) are submitted for filing.
Please return all correspondence concerning	this matter to:	
Mandy Pavlakos, Esq.		
(Contact Person)		
Law Office of Mandy Pavlakos, P.A.		
(Firm/Company)		_
142 W. Lakeview Ave. Suite 2090		
(Address)		_
Lake Mary, FL 32746		
(City/State and Zip Code)		<del>-</del>
For further information concerning this matter	er, please call:	
Mandy Pavlakos	407 at (	4153863
(Name of Contact Person)		& Daytime Telephone Number)
Enclosed please find a check made payable t  \$\begin{align*} \$25 \text{ Filing Fee} \$\extstyle{100}\$		Department of State for: g Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 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)

of State is:	de 182, LLC		of the Florida Department  ility company is:
	ber/manager withdrew/res	signed or will withdraw/res	sign is:
4. L Oscar Vargas		. hereby withdraw/re	esign as a
(Print Nat	ne of Person Resigning)	, hereby withdraw/re	
Managing Mem	ber		
(P	rint Title)		
resignation in writi	ng		y has been notified of my
Signature of Diss	sociating Member or Resig	gning Manager	- 10
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		FILED  JAN-9 P 5: 0  FANASSEF. FLORI