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COVER LETTER

TO: Registration Section Division of Corporations			
Wynwood Gates, LLC *			
SUBJECT:			_
(Name of Lin	nited Liability Con	npany)	
The enclosed member, resignation or dissoc	iation and fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to:		
Cara-Jenna Kronengold, Esq.			
(Contact Person)		-	
Cara-Jenna Kronengold, P.A.			
(Firm/Company)		•	
151 N. Nob Hill Road, Suite 347			
(Address)		-	
Plantation, FL 33324			<u> </u>
(City/State and Zip Code)		-	330 6 31.53
For further information concerning this matt	er, please call:		ည် ႏ
Cara-Jenna Kronengold, Esq.	954	658-8101	P
(Name of Contact Person)	_ at ((Area Code	& Daytime Telephone Number)	- y
Enclosed please find a check made payable	to the Florida D	epartment of State for:	3,
□ \$25 Filing Fee Marcy	\$55 Filing	Fee & Certified Copy	
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Mailing Address:		Street Address:	
Registration Section Registration Section Division of Corporations Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	
		Tałlahassee, FL 32303	_
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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)

WY	limited liability company as it NWOOD GATES, LLC	appears on the records of the Florida De	partme	ent
2. The Florida docu L15000060	•	gned to this limited liability company is:		
Elias Amkie 4. I.	Levy	ned or will withdraw/resign is:	10 1°	} •-
Manager				
	· · · · · · · · · · · · · · · · · · ·	limited liability company has been notific	19නිEC -3 PM ප්	ango kondesiali 40 Xamendas 63 Peta
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)	ng Manager	5: 36	SIATE