## L150000 88164

(Re	equestor's Name)			
(Ac	ddress)			
(Ac	ddress)			
(Ci	ity/State/Zip/Phone #)			
PICK-UP	WAIT	MAIL		
(Br	usiness Entity Name)			
(Document Number)				
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SECRETARY OF STATE

T. HAMPTON

## COVER LETTER

TO: R	legistration Section		
Ε	Division of Corporations		
SUBJEC	CT: Beach Valley Enterprises	s L.L.C	
	(Name of	Limited Liability Cor	mpany)
The encl	osed member, resignation or dis	sociation and fee(s	s) are submitted for filing.
Please re	turn all correspondence concern	ing this matter to:	
Elghali l	Elakram		
	(Contact Person)		-
Beach \	/alley Enterprises L.L.C		
	(Firm/Company)		<del>-</del>
714 E. I	nternational Speedway Blvd		
	(Address)		_
Daytona	a beach, Fl 32118		
	(City/State and Zip Code)		_
For furth	er information concerning this n	natter, please call:	
Eghali E	Elakram	386	3079713
	(Name of Contact Person)		& Daytime Telephone Number)
Enclosed □ \$25 Fi	please find a check made payabiling Fee		Department of State for: 3 Fee & Certified Copy
	Γ/COURIER ADDRESS:		MAILING ADDRESS:
	ion Section of Corporations	!	Registration Section
Clifton B		\ \	Division of Corporations P.O. Box 6327
	ecutive Center Circle	/	Tallahassee, Florida 32314
	see, Florida 32301	•	

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)

	limited liability company as	• •	f the Florida Department	
2. The Florida docu L15000088164	ument/registration number as	ssigned to this limited liabil	lity company is:	
	mber/manager withdrew/res	igned or will withdraw/resi	gn is: 05/27/2015	
4. I, <u>Kathryn Hogan</u>		, hereby withdraw/resign as a		
(Print N	ame of Person Resigning)			
MGR				
	(Print Title)			
Signature of Di	ssociating Member or Resign \$25.00 (Required) \$30.00 (Optional)		has been notified of my  SECRETARY OF S  ALLAHASSEE, FI	
• •	` <b>.</b>		: 12 TATE LORID	