1500192134

(Re	equestor's Name)		
(Address)			
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
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OIVISION OF CORPORATIONS

O SIMMONS JUN 1 9 2017

COVER LETTER

TO:	
	Division of Corporations
SUBJ	Vast Peak Property LLC
	(Name of Limited Liability Company)
The e	nclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please	e return all correspondence concerning this matter to:
June	Wu ·
	(Contact Person)
	(Firm/Company)
_5(068 W. Colonial Dr.
	(Address)
	Obb W. Glonial Dr. (Address) Oblando, FL 32808 (City/State and Zip Code)
For fu	orther information concerning this matter, please call:
	June Wu at (407) 822-1818
	(Name of Contact Person) at (407) 822-1818 (Area Code & Daytime Telephone Number)
	sed please find a check made payable to the Florida Department of State for: 5 Filing Fee & Certified Copy
	CET/COURIER ADDRESS: MAILING ADDRESS:
_	tration Section Registration Section on of Corporations Division of Corporations
	on of Corporations Division of Corporations P.O. Box 6327
	Executive Center Circle Tallahassee, Florida 32314
Tallah	passee, Florida 32301

CR2E079 (2/14)



FLORIDA DEPARTME DIVISION OF CORE	
DISSOCIATION OR RESIGNATION OF FLORIDA OR FOREIGN LIMIT (Pursuant to 605.0216, 1) 1. The name of the limited liability company as it approach. Proposite Proposite Lie Company as it approach.	OF MEMBER, MANAGER FROM ED LIABILITY COMPANY Florida Statutes) OF MEMBER, MANAGER FROM ED LIABILITY COMPANY Florida Statutes
The name of the limited liability company as it ap State is: Vast Peak Property, LLC	pears on the records of the Florida Department
2. The Florida document/registration number assigned L15000192134	ed to this limited liability company is:
3. The date this member/manager withdrew/resigned	or will withdraw/resign is: 3/28/17
	, hereby withdraw/resign as a
(Print Name of Person Resigning) AMBR	
(Print Title)	
of this limited liability company and affirm the lim resignation in writing.	ited liability company has been notified of my
Signature of Dissociating Member or Resigning	Manager
Filing Fee: \$25.00 (Required)	

\$30.00 (Optional)

Certified Copy: