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MAR 0 2 2016 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: PROJECT Name of Lin	mid Liability Company)
The enclosed member, resignation or dissoc	iation and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to:
JAIVIN TACKUS (Contact Person)	
(Contact Person) My May May Son (Pirm/Company)	of FL inc
72/9 Sourgaint Place (Address)	
Apollo Bench, 1-L 333 (City/State and Zip Code)	572
For further information concerning this mate	ter, please call:
(Name of Contact Person)	at (\overline{\darksquare} 3 / 3) \overline{\darksquare} 766 \overline{\darksquare} 7353 \\ (\text{Area Code & Daytime Telephone Number)}
Enclosed please find a check made payable \$25 Filing Fee	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

2661 Executive Center Circle

Tallahassee, Florida 32301



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)

1. The name of the	e limited liabilit	y company as i	t appears on the	records of th	e Florida De	partment
of State is:	Frences	Property	Maragem	ent FL	LLC	
2. The Florida doc	ument/registrat	ion number ass	igned to this lim	ited liability	company is:	
1/60	1000038.	37	·			
3. The date this mo	ember/manager	withdrew/resig	gned or will with	draw/resign	is: <u>2/24</u>	13016
4. I, <u>Li S</u> a		us	, hereby with		, ,	
Ma	nager (Prinditle)					
of this limited lia resignation in w		and affirm the	limited liability	company ha	s been notifie	ed of my
) via f	achus	-			
Signature of D	issociating Mer	mber or Resign	ing Manager		7	
Filing Fee: Certified Copy:	· ·				ECRETARY D	16 FEB 29
					. F.	¥ [1]