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(R	requestor's Name)	
(A	ddress)	
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: EDITION PROPERTIES LLC (Name of Limited Liability Company)	
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to:	
Regulo Pachano (Contact Person)	
(Contact i cison)	
(Firm/Company)	
78 SW 7TH STREET, 5th FLR	
(Address)	
Miami FL 33130 City/State and Zip Code)	نہ
For further information concerning this matter, please call: at (1- NOT 61
(Name of Contact Person) (Area Code & Daytime Telephone Number)	OF STATE
Enclosed please find a check made payable to the Florida Department of State for: \$\omega\$ \$25 Filing Fee \$\omega\$ \$55 Filing Fee & Certified Copy	TATE ATIONS : 02

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

CR2E079 (2/14)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



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	limited liability company as it appears on the records of the Flor	ida Department
of State is:	EDITION PROPERTIES LLC	. <u>. </u>
2. The Florida docu	ment/registration number assigned to this limited liability compa	any is:
L160	00004755	
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:	05/20/2019
4. I, DIEGO	CARABALLO , hereby withdraw/resign as a	19 J
(Print N	ame of Person Resigning)	NOT OF STREET
MGR		1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1
	(Print Title)	AM I
of this limited liab resignation in wri	pility company and affirm the limited liability company has been ting.	
	Docusigned by: 5/23/2019	()
Signature of Di	ssociating Member or Resigning Manager	
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	