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SECRETARY OF STATE DIVISION OF CORPORATIONS

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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 | he limited liability company as | it appears on the records of the Florida Department |
|---------------------------------------|---------------------------------|---|
| of State is: | ommercial Equity Partners Pr | operty Services, LLC |
| 2. The Florida do | ~ | signed to this limited liability company is: |
| 3. The date this r | member/manager withdrew/resig | gned or will withdraw/resign is: |
| 4. I,Barth | 1 | , hereby withdraw/resign as a |
| MGR -Man | ager | |
| | (Print Title) | |
| of this limited l resignation in v | , | limited liability company has been notified of my |
| Signature of | Dissociating Member or Resign | ning Manager |
| Filing Fee: | \$25.00 (Required) | AR - |

Certified Copy:

\$30.00 (Optional)