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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 1350 97TH STREET LLC	
(Name of I	limited Liability Company)
The enclosed member, resignation or disso	ociation and fee(s) are submitted for filing
Please return all correspondence concernit	ng this matter to.
YAIR OREN	
(Contact Person)	
1350 97TH STREET LLC	
(Firm Company)	
135 BAL BAY DRIVE	
(Address)	
BAL HARBOUR, FL 33154	
(City State and Zip Code)	
For further information concerning this ma-	tter, please call:
AL MASTERS CPA PA	954 755-2355 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable S25 Filing Fee	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Ulifton Building 2661 Executive Center Circle fallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florada 32314

CR21079 (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)

1. The name of of State is: $\frac{1}{2}$	the limited liability company as it appears on the records of the 350 97TH STREET LLC	: Florida Department
	locument registration number assigned to this limited liability c	
, , MATTY O	member/manager withdrew/resigned or will withdraw/resign is REN	
MANAGER		Ξ.
of this limited	liability company and affirm the limited liability company has l	been notified of my
resignation	Writing.	3 AH 7: 3
Signature of	Dissociating Member or Resigning Manager	
Filing Fee:	\$25.00 (Required)	

Certified Copy:

\$30,00 (Optional)