

L16000182250

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000304084210

10/06/17--01007--022 \*\*25.00

FILED

17 OCT -6 AM 11:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*[Signature]*  
10/10/17

RESIGNATION OF MANAGER

September 25, 2017

PCGP ROYAL PALM, LLC  
7280 W. Palmetto Park Road  
Suite 105  
Boca Raton, Florida 33433

Attn: Capital Growth Properties Operating Partners, LLC

Re: Resignation as Manager

To Whom It May Concern:

This letter is the resignation of Wendy Sheldon, as a Manager of PCGP Royal Palm, LLC, effective as of the date of this correspondence.

  
\_\_\_\_\_  
Wendy Sheldon



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 Florida Department of State is: PCGP ROYAL PALM, LLC
2. The Florida document/registration number assigned to this limited liability company is:  
L16000182250
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 9/25/2017
4. I, WENDY SHELDON, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
Manager  
*(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

FILED  
17 OCT -6 AM 11:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA