L170000 18271

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Tam Real Estate Holdings 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:
MARIO FASANOLLI (Contact Person)
(Firm/Company)
383 E CORAL TRACE CR
283 El CORAL TRACE CR (Address) DelRay Beach FL 33445 (City/State and Zip Code)
For further information concerning this matter, please call:
MARIO FASANELLI at (917) 405-1323 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: □ \$25 Filing Fee

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



DIVISION OF CORPORATIONS DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLODING OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

	·
1. The name of the li	mited liability company as it appears on the records of the Florida Department
of State is:	J& M Real Estate Holdings, LLC.
	nent/registration number assigned to this limited liability company is:
L170000	18271
3. The date this mem	ber/manager withdrew/resigned or will withdraw/resign is: 11 29 2017
4.1, Joshua Prini Nan	hereby withdraw resign as a ne of Person Resigning)
MCR (P	rint Title)
	lity company and affirm the limited liability company has been notified of my
resignation in writi	ing.
()	ociating Member or Resigning Manager
Filing Fee:	
Certified Copy:	\$30.00 (Optional)