# L17000079569

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#### **COVER LETTER**

Division of Corporations FMB PROPERTY INVESTMENTS LLC SUBJECT: (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: Stoven A. Kamunni (Contact Person) TPUPN A Raw WWWi (Firm/Company) For further information concerning this matter, please call: (Name of Contact Person)

(Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy \$25 Filing Fee

#### STREET/COURIER ADDRESS:

Registration Section

TO:

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

MAILING ADDRESS:

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

CR2E079 (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 the	limited liability company as	s it appears on the records of the Florida Department	
of State is:	1B Property Investments L	LC	
2. The Florida doc L1700007956	· ·	ssigned to this limited liability company is:	
3. The date this me	ember/manager withdrew/res	signed or will withdraw/resign is:	
4. lJE	ESSE SCHMID	hereby withdraw/resign as a	
(Print 8	Name of Person Resigning)	hereby withdraw/resign as a	
	MGR		
	(Print Title)		
of this limited lia resignation in wr		ne limited liability company has been notified of my	
	Aud (S	<i>)</i> 	
Signature of D	issociating-Member or Resig	gning Manager	
Filing Fee:	\$25.00 (Required)		
<del></del>	\$30.00 (Optional)		