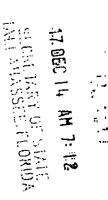


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CR2E079 (2/14)

COVER LETTER

TO: Registration Section Division of Corpor	
SUBJECT: CBTY AND	SONS PROPERTY LLC
	(Name of Limited Liability Company)
The enclosed member, resi	gnation or dissociation and fee(s) are submitted for filing.
Please return all correspond	dence concerning this matter to:
ERICKA LOPES	
(Cont	act Person)
FLORIDA TAX HOUSE	
'(Firm	(Company)
7550 FUTURES DR SU	TE 306
(Ac	ldress)
ORLANDO - FL - 32819	
(City/Stat	e and Zip Code)
For further information cor	cerning this matter, please call:
ERICKA LOPES	352 459-1054
(Name of Contact	Person) (Area Code & Daytime Telephone Number)
Enclosed please find a chec	k made payable to the Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADI	· · · · · · · · · · · · · · · · · · ·
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circ	
Tallahassee, Florida 32301	,



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
1. The name of the l	mited liability company as it appears on the records of the Florida Department
of State is:	AND SONS PROPERTY LLC
2. The Florida docum	nent/registration number assigned to this limited liability company is:
L17000199690	
3. The date this mem MARIA A B BU	ber/manager withdrew/resigned or will withdraw/resign is:
	, hereby withdraw/resign as a me of Person Resigning)
AMBR	
(P	rint Title)
of this limited liabi resignation in writi	lity company and affirm the limited liability company has been notified of my
c Maria apo	recida Bittencourt Bunty
✓Signature of Diss	ociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)