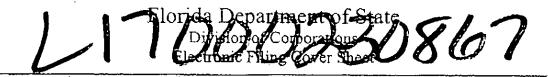
7/20/2018

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000210266 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : 120000000146

Phone : (305)444-4994

Fax Number : (305)444-4977

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

B

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SOUTHLAND INVESTMENT TRUST LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

O SIMMONS JUL 2 3 2018



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM

(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: Sou	ithland Investment Trust, L	LC
2. The Florida docu	ument/registration number as	signed to this limited liability company is:
L1	7000230867	
3. The date this me	:mber/manager withdrow/resi	gned or will withdraw/resign is: 01/20/2018
4. I, Alfredo Gonzalez (Print Name of Person Resigning)		, hereby withdraw/resign as a
(Print N	iome of Person Resigning)	 , , ,
•	Manager	
	(Print Title)	
of this limited lia resignation in wr		e limited liability company has been notified of my
fulrus	Toget.	
Signature of Di	issociating Cember or Resign	ning Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	