L19000206629

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	e #)
PICK-UP	MAIT WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
:		

Office Use Only



300334332093

09/22/19--01030--021 **25.00

2019 ST 23 PM 5: 47

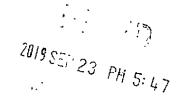
R. WHITE OIT OF IN

COVER LETTER

TO: Registration Section		
Division of Corporations		<i>y</i>
SUBJECT: 7720 SW 134 CT LLC		
(Name of Li	mited Liability C	ompany)
The enclosed member, resignation or dissor	ciation and fee	e(s) are submitted for filing.
Please return all correspondence concerning	g this matter to):
Susan V. Welsh		
(Contact Person)		<u> </u>
(Firm/Company)		
11015 SW 119th St.		
(Address)		<u> </u>
Miami, FL 33176		
(City/State and Zip Code)	· · · · · · · · · · · · · · · · · · ·	
For further information concerning this mat	ter, please cal	1:
Brian C. Perlin, Esq.	305	443-3104
(Name of Contact Person)	_ \	de & Daytime Telephone Number)
Enclosed please find a check made payable ■ \$25 Filing Fee		Department of State for: ng Fee & Certified Copy
STREET/COURIER ADDRESS:		MAILING ADDRESS:
Registration Section		Registration Section
Division of Corporations Clifton Building		Division of Corporations P.O. Box 6327
Clifton Building 2661 Executive Center Circle		P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301		ганана8800, гюнца эдэт4

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)

	e limited liability company as it appears on the records of the Florida Department 20 SW 134 CT LLC
2. The Florida doo L1900020662	cument/registration number assigned to this limited liability company is:
Fred R. Wel	ember/manager withdrew/resigned or will withdraw/resign is:
(Print) Manager	, hereby withdraw/resign as a Name of Person Resigning)
	(Print Title)
of this limited lia resignation in w	ability company and affirm the limited liability company has been notified of my riting.
Tred!	RWelsh
Signature of D	issociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required)
connect copy.	\$30.00 (Optional)