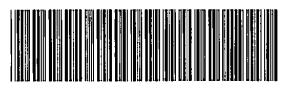
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Special Instructions to Filing Officer:		
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COVER LETTER

TO: Registration Section Division of Corporations	·
SUBJECT: 9340 For (Name of Line	tainebleau Blvd 502 LL(
The enclosed member, resignation or dissoci	ation and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to:
Carmen L. Amorin (Contact Person)	
9340 Fontainebleau B	1 vd. 502 LLC
2820 SW 100 AUEN	JE
Miami FL 33165 (City/State and Zip Code)	
For further information concerning this matt	er, please call:
Carmen L. Amorin (Name of Contact Person)	at (<u>305</u>) <u>775 - 2812</u> (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable t ☐ \$25 Filing Fee	to the Florida Department of State for: \$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
P.O. DOX 0347	THE CEIMIE OF Tallanassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E079 (2/14)

Tallahassee, FL 32314



7 1 23 PT 215

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 it appears on the records of the Florida Departm
of State is: 9340 Fontainebleau Blud 502 LLC
2. The Florida document/registration number assigned to this limited liability company is:
<u>LZ0000028432</u>
3. The date this member/manager withdrew/resigned or will withdraw/resign is: $\frac{\sqrt{6}/22}{22}$
4. 1. Carlos E. Amorio, hereby withdraw/resign as a (Print Name of Person Resigning)
MGR (Print Title)
of this limited liability company and affirm the limited liability company has been notified of r resignation in writing.
Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)