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COVER LETTER

| TO: | _ | tration Section ion of Corporations | | | |
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| SUBJ | ECT: | ORLANDO | TURNKEY (Name of Limited Liabili | PROPERTY (Ity Company) | GROUP |
| | | | vivame or finited thaom | пу Селирину) | |
| The en | iclosed | member, resignation | on or dissociation and | I fee(s) are submitted | for filing. |
| Please | return | all correspondence | concerning this matt | er to: | |
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| | | (Firm/Compa | my) | | |
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| ORL | ννο | 0 FL 3 (City/State and Z | , 2838 ip Code) | | |
| For fu | rther in | formation concerni | ng this matter, please | eall: | |
| ART | нц к (Na | SLODKou | at (<u>4</u> | (07) 963-9 Code & Daytime Tele | 0 7 3 phone Number) |
| | sed plea 5 Filing | | de payable to the Flo □ \$55 | rida Department of S Filing Fee & Certifie | |
| | Regist Divisi P.O. I | g Address: tration Section ion of Corporations Box 6327 nassee, FL 32314 | | Street Address: Registration Se Division of Co The Centre of 2415 N. Monre Tallahassee, F | rporations Tallahassee oe Street, Suite 810 |



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 ap | opears on the records | of the Florida Department |
|----|---|-------------------------|----------------------------|
| 4 | of State is: ORLANDO TURNKEY | PROPERTY | GROUP. |
| 2. | The Florida document/registration number assign | ed to this limited liab | oility company is: |
| | 86-1414738 | · | |
| 3. | The date this member/manager withdrew/resigne | d or will withdraw/re | sign is: <u>5-10-21</u> |
| 4. | I. BRADY RICHARDSON (Print Name of Person Resigning) | _, hereby withdraw/re | esign as a |
| | MANAGER (Print Title) | | |
| | f this limited liability company and affirm the linesignation in writing. | nited liability compar | ny has been notified of my |
| | Bruch Richardon | | |
| | Signature of Dissociating Member or Resigning | Manager | |
| | | | |

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee:

Certified Copy: