L21000018145

| (Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) |
|--------------------------------------------------------------------|
| (Address) |
| |
| |
| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Dusiness Littly Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |

Office Use Only

A. RIVIRG MAR 1 5 2023



300399788503

01/08/23 -31017--019 :-20.00

TILED
2023 JAN -9 AM 11: 00

COVER LETTER

| TO: Registration Section Division of Corporations | |
|------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| SUBJECT: E+S Deal (Name of Limited I | Estate advisors, Luc Liability Company) |
| The enclosed member, resignation or dissociation | n and fee(s) are submitted for filing. |
| Please return all correspondence concerning this | matter to: |
| Shana Mabie (Contact Person) | |
| (Firm/Company) | |
| 1530 Forest Glen (| 1 |
| Pum Harbor, Fr 3 (City/State and Zip Code) | 34683 |
| For further information concerning this matter, p | lease call: |
| Shand Mabie at (Name of Contact Person) | (72) 244~ 4729 (Area Code & Daytime Telephone Number) |
| Enclosed please find a check made payable to the \$25 Filing Fee | e Florida Department of State for: \$55 Filing Fee & Certified Copy |
| Mailing Address: Registration Section Division of Corporations P.O. Box 6327 | Street Address: Registration Section Division of Corporations The Centre of Tallahassee |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E079 (2/14)

Tallahassee, FL 32314



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 Department |
|------------------------------------------|-----------------------------------------------------------------------------------------|
| of State is: | EtS Real Estate advisors |
| 2. The Florida doc | ument/registration number assigned to this limited liability company is: |
| | L21 0000 18145 |
| 3. The date this me | ember/manager withdrew/resigned or will withdraw/resign is: 1 - 2 - 2023 |
| 4. I, | Ame of Person Resigning), hereby withdraw/resign as a |
| | MGR (Print Title) |
| of this limited lia resignation in wr | bility company and affirm the limited liability company has been notified of my riting. |
| | |
| Signature of D | issociating Member or Resigning Manager |
| Filing Fee: | \$25.00 (Required) |
| Certified Copy: | \$30.00 (Optional) |

| . | | | | | | | | |
|------------------------------------------------------------|-----------------------------------------------|--------------------------------|----------------------------------|-----------------------------------|----------------------------------|-------------------------------------|-------------------------------|------------------|
| | <u> </u> | | | | | - | | |
| | | | | | | | | ·· |
| | | | _ | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | - | | |
| | ····· | | | | | | | |
| | | | | | | | | |
| | | - | | | | | | |
| | <u></u> . | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| · · · · · · · · · · · · · · · · · · · | | | | | | | 200 | 2023 |
| | | | | | | | 2.0° | JAN |
| Effective date, if o | ther than the date | of filing: | | | | (options | 1. A.S.S.A. J.W.R. | , L |
| f an effective date is lis Note: If the date ins | ted, the date must be spected in this block d | oecific and car oes not mee | mot be prior to t the applica | o date of filing ble statutory | or more than 9 filing require | 0 days after fili ments, this da | ng.) Půřstian ite will not | to 605.02 |
| document's effective | date on the Departi | nent of Stat | e's records. | | | | | = |
| e record specifies a ded is filed. | lelayed effective date | e, but not an | effective tin | ne, at 12:01 | a.m. on the ea | rlier of: (b) | 要託 The 90th da | O ay after th |
| Dated | jan2nd | · ; | 2023 | _· | | | | |
| | Ċ: | | hana | Mab | tative of a mem | huhr | | |
| | Signa | nuic or a mer | O I | izeu represen | tative of a mem | (PCI | | |
| | | Ту | 3 N | lna n | 122014 | | | |

Filing Fee: \$25.00