21000102096

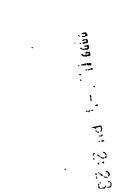
(Requestor's	Name)
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COVER LETTER

TO: Registratio Division of	n Section Corporations		
SUBJECT:	5141 NE (Name of I	3RD Limited Liability	AVE, LLC y Company)
The enclosed mem	ber, resignation or diss	ociation and	fee(s) are submitted for filing.
Please return all co	orrespondence concerni	ng this matte	r to:
Ricard	do Cabal	lero	
<u>5141 NE</u>	3RD AVE L	.LC	
12287 1	Pleasant G	reen W	'ay
Boynton	Beach, FL (City/State and Zip Code)	33437	,
For further inform	ation concerning this m	atter, please	call;
Eleanor Glo	Contact Person)	at (<u>57</u> (Area	Code & Daytime Telephone Number)
Enclosed please file \$25 Filing Fee	nd a check made payab		ida Department of State for: Filing Fee & Certified Copy
66 Yr - 4 13			Course Addison.

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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)

1. The name of the limited liability company as it appears on the records of the Flor	rida Department
of State is: 5141 NE 3RD AVE, LLC	
2. The Florida document/registration number assigned to this limited liability comp	pany is:
L21000102096	
3. The date this member/manager withdrew/resigned or will withdraw/resign is:	04-04-22
4.1. Electron Colosco-Grinsley 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 resignation in writing.	·
Elin Short	ŋnŋŋ [·
Signature of Dissociating Member or Resigning Manager	1 _·
Filing Fee: \$25.00 (Required) ✓ Certified Copy: \$30.00 (Optional)	r:: 2: 23