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COVER LETTER

TO:	Registration Section	
	Division of Corporations	
SUBJ	ECT: Imani Properties, LLC	2-11-122- C
	(Name of Li	mited Liability Company)
The co	nclosed member, resignation or disso	ciation and fee(s) are submitted for filing.
Please	e return all correspondence concerning	g this matter to:
Marlisa	a Harrison	
	(Contact Person)	
Imani l	Properties, LLC	
	(Firm/Company)	· · · · · · · · · · · · · · · · · · ·
4581 V	Veston Road, #131	
	(Address)	
Westor	n, FL 33331	
	(City/State and Zip Code)	
For fu	orther information concerning this ma	tter, please call:
Martisa	a Harrison	954 393-5153 at ()
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
		to the Florida Department of State for:
■ \$2:	5 Filing Fee	☐ \$55 Filing Fee & Certified Copy
	Mailing Address:	Street Address:
	Registration Section Division of Corporations	Registration Section Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	1 41141143000, 1 17 32317	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)

of State is: Imar		
1.21000276 00 4	Junichoregistration number a	assigned to this limited liability company is:
		signed or will withdraw/resign is: 8/31/2021
4. I,	on	, hereby withdraw/resign as a
(Print)	Name of Person Resigning)	
Authorized Perso	on.	
	(Print Title)	
of this limited lia resignation in w		he limited liability company has been notified of my
	. /	
Geneva /		
	farms m issociating Member or Resig	
Signature of D	issociating Member or Resig \$25.00 (Required)	
Signature of D	issociating Member or Resig \$25.00 (Required)	SECRETAL AND SECRETARY SERVICES