L21000303114

| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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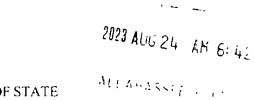
COVER LETTER

Division of Corporations Lovely Properties, LLC SUBJECT: (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Cherie Coleman (Contact Person) Lovely Properties LLC (Firm/Company) 261 North University Drive St 500 #1002 (Address) Plantation, Florida 33324 (City/State and Zip Code) For further information concerning this matter, please call: Cherie Coleman (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: S55 Filing Fee & Certified Copy ☐ \$25 Filing Fee Street Address: Mailing Address: Registration Section Registration Section **Division of Corporations Division of Corporations** The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

TO:

Registration Section





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 l | mited liability company as it appears on the records of the Florida Department Lovely Properties, LLC |
|---|--|
| | nent/registration number assigned to this limited liability company is: 21000303114 |
| 3. The date this men | ber/manager withdrew/resigned or will withdraw/resign is: |
| 4. 1, <u>Jo Wan te</u> (Print Na. | he of Person Resigning), hereby withdraw/resign as a |
| ** | AP rint Title) |
| of this limited liab resignation in writ | lity company and affirm the limited liability company has been notified of my |
| . Invante | M Sightower ociating Member or Resigning Manager |
| Signature of Dis | ociating Member or Resigning Manager |
| Filing Fee: | \$25.00 (Required) \$30.00 (Optional) |