L21000 428130

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PICK-UP WAIT MAIL
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COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: VENICE ASSETS LLC (Name of Limited Liabil)	ity Company)
The enclosed member, resignation or dissociation and	d fee(s) are submitted for filing.
Please return all correspondence concerning this matt	er to:
JOHN PATTERSON	
(Contact Person)	
VENICE ASSETS LLC	
(Firm/Company)	
2880 SW 23RD TERR	
(Address)	
DANIA BEACH, FL 33312	
(City/State and Zip Code)	
For further information concerning this matter, please	e call:
JOHN PATTERSON 954	
	a Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Flo ■ \$25 Filing Fee ■ \$55	orida Department of State for: Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	

CR2E079 (2/14)





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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)

	limited liability company as it a	opears on the records of the Florida Department
2. The Florida doc L2100042813		ned to this limited liability company is:
3. The date this mo	ember/manager withdrew/resigne	d or will withdraw/resign is:
		d of will willidiaw/tesign is.
4. I.	Name of Person Resigning)	_, hereby withdraw/resign as a
(Print N	Name of Person Resigning)	
AUTHORIZE	D REPRESENTATIVE	
	(Print Title)	
of this limited lia resignation in wr	· · · · · · · · · · · · · · · · · · ·	nited liability company has been notified of my
	and and	
Signature of b	issociating Member or Resigning	Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:		