## L20200050543

(Re	equestor's Name)	<del></del>	
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	MAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



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## **COVER LETTER**

TO: Registration Section
Division of Corporations

PASHA REAL ESTATE INVEST SUBJECT:	TMENTS LLC
	Limited Liability Company)
The enclosed member, resignation or diss	sociation and fee(s) are submitted for filing.
Please return all correspondence concerni	ing this matter to:
Mehmet Turantekin	
(Contact Person)	
PASHA REAL ESTATE INVESTMENTS LLC	
(Firm/Company)	
31129 Chesapeake Bay DR	
(Address)	<del></del>
Wesley Chapel, FL 33543	
(City/State and Zip Code)	
For further information concerning this m	natter, please call:
Mehmet Turantekin	501 786-3600 at ( )
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
•	ole to the Florida Department of State for:
■ \$25 Filing Fee	\$55 Filing Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

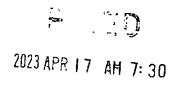
2415 N. Monroe Street, Suite 810

CR2E079 (2/14)

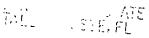
P.O. Box 6327

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)

	e limited liability company as in	t appears on the records of the Florida Department
2. The Florida doc	ument/registration number ass	igned to this limited liability company is:
1,22000050543		
3. The date this me	ember/manager withdrew/resig	ned or will withdraw/resign is:
4. 1. Efza Elif Turantekin		hereby withdraw/resign as a
(Print i	Name of Person Resigning)	, hereby withdraw/resign as a
Member		
	(Print Title)	
of this limited lia resignation in w		limited liability company has been notified of my
Signature of D	issociating Member or Resigni	ng Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	