123000178053

(Requestor's Name)				
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Platinum Palms Really LLC (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:
Edgar Broche (Contact Person)
Platinum Palms Realty LLC (Firm/Company)
8241 NW 165 Ter (Address)
Miani Lakes, FL 33016 (City/State and Zip Code)
For further information concerning this matter, please call:
Edgar Broche at (786) 451 7223 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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)

		s it appears on the records of th	e Florida Depar	tmeni	t
of State is: $\frac{f}{f}$	Platinum Palms	Righty LLC			
		ssigned to this limited liability	company is:		
<u> 1230001-</u>	78053		1 1		
4.1. <u>beerg</u> (Print) <u>Author</u>	ember/manager withdrew/res e Ye 'ame of Person Resigning) He Mi Mi MET. (Print Title)	signed or will withdraw/resign i	s: <u>(0/6/2</u> as a	<u>23</u>	
resignation in wr	- · · ·	ne limited liability company has		of my 2023 OCT 10	李 · · · · · · · · · · · · · · · · · · ·
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		: - -	AH []: 2	igi H