

L23000260264

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

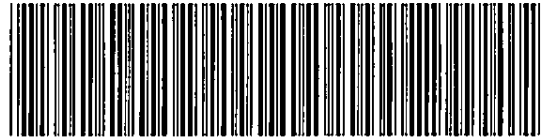
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

**J. HORNE**  
**FEB - 5 2024**

Office Use Only



100421246351

01/12/24--01012--019 \*\*25.00

FILED  
24 JAN 12 AM 9:19  
CLERK OF DISTRICT COURT  
JAN 12 2024

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DONE4YOU REAL ESTATE 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:

VALESKA BIEN-AIME  
(Contact Person)

DONE4YOU REAL ESTATE LLC  
(Firm/Company)

4914 BOSQUE CREEK CIRCLE APT. 201 TAMPA, FL 33619  
(Address)

TAMPA, FL 33619  
(City/State and Zip Code)

For further information concerning this matter, please call:

VALESKA BIEN-AIME at (203) 939-3055  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FILED  
24 JAN 12 AM 9:19  
TALLAHASSEE, FLORIDA

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 limited liability company as it appears on the records of the Florida Department of State is: DONE4YOU REAL ESTATE LLC
2. The Florida document/registration number assigned to this limited liability company is:  
L23000260264
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 1/9/24
4. I, VALESKA BIEH-AIME, hereby withdraw/resign as a  
(Print Name of Person Resigning)  
AMBR  
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

VaP

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)