## 123000312149

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
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## COVER LETTER

	stration Section sion of Corporations		
SUBJECT:	Polynesian Villagers Realty, LL	C	
		f Limited Liability C	ompany)
The enclose	d member, resignation or dis	sociation and fee	(s) are submitted for filing.
Please return	n all correspondence concerr	ning this matter to	o:
Archie L. Gus	tin		
	(Contact Person)		_
Archie L. Gus	tin. Attorney at Law		
	(Firm/Company)		_
5500 Military	Trail. Suite #22-381		
	(Address)	<u> </u>	
Jupiter, FL 33-	458-2869		
	(City/State and Zip Code)		_
For further in	nformation concerning this r	natter, please call	l:
Archie L. Gust	tin. Attorney at Law	561 at (	202-3133
(N	Jame of Contact Person)		le & Daytime Telephone Number)
Enclosed ple <b>= \$2</b> 5 Filing	ease find a check made payat g Fee		Department of State for:  ig Fee & Certified Copy
Regis Divis P.O.	ng Address: stration Section sion of Corporations Box 6327 hassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



## 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)

	imited liability company as i	it appears on the records of the	Florida Departm	ent 
2. The Florida docur	nent/registration number ass	signed to this limited liability c	ompany is:	
3. The date this men	nber/manager withdrew/resi	gned or will withdraw/resign is	October 2, 2023	_
4. I, Tamara J. Brown (Print Nat.	me of Person Resigning)	, hereby withdraw/resign as a		
Manager	Print Title)			
of this limited liab resignation in writ		e limited liability company has		my
Signature of Dis	Sociating Member or Resign	ning Manager	2023 OCT 31	
	\$25.00 (Required) \$30.00 (Optional)		AH 9: 11	