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| PICK-UP                                 | ☐ WAIT             | MAIL |  |
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| Certified Copies Certificates of Status |                    |      |  |
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## **COVER LETTER**

| TO: Registration Section Division of Corporations  |   |  |  |  |  |
|--|---|--|--|--|--|
| SUBJECT: Sunsational Real Estate Investors LL (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:  |   |  |  |  |  |
| Clarice Brown (Contact Person)   |   |  |  |  |  |
| Sunsational Real Estate Investors, LLC.  |   |  |  |  |  |
| 3510 NW 110th lane Unit A  |   |  |  |  |  |
| Coral Spiras FL 33665 (City/State and Zip Code)  |   |  |  |  |  |
| For further information concerning this matter, please call:   |   |  |  |  |  |
| (Name of Contact Person) at (97) 478-5679  (Area Code & Daytime Telephone Number   |   |  |  |  |  |
| Enclosed please find a check made payable to the Florida Department of State for:  \$\square\$ \$\$\square\$\$ \$\$\square\$\$ \$\$\square\$\$ \$\$\square\$\$\$ \$\$\square\$\$\$\$\$ \$\$\square\$ | , |  |  |  |  |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, Florida 32314  |   |  |  |  |  |

CR2E079 (2/14)

Tallahassee, Florida 32301



## 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 li                                       | mited liability company a | as it appears on the records of t | the Florida Department                   |
|---|---------------------------|-----------------------------------|--|
| of State is:  | 151-17 onal Rea           | 1 Estate Investor                 | S,LLC.                                   |
| 2. The Florida docum  | nent/registration number  | assigned to this limited liabilit | y company is:                            |
| M 18000   | 000303                    | ·                                 |  |
| 3. The date this mem  | ber/manager withdrew/ro   | esigned or will withdraw/resign   | n is: <u>December 31,</u> 2018           |
| 4. I. ( ) arrice  | - Brown                   | , hereby withdraw/resig           |  |
| Manaa   | ne of Person Resigning)   |                                   |  |
| (P  | rint Title)               |                                   |  |
|   |                           | the limited liability company h   | as been notified of my                   |
| resignation in writi  | ng.                       |                                   | <b>5</b> € ¬                             |
| (Voru   | Parin                     |                                   | FILED  MAR -5 PH 4: 43  ANIASSEL FLORIDA |
| Signature of Dissociating Member or Resigning Manager 크 글 글 |                           | 고 기 교 모                           |  |
|   |                           |                                   | 0800<br><b>1</b>                         |
| Filing Fee:   | \$25.00 (Required)        |                                   | $\sim$ $\sim$                            |
| Certified Copy:   | \$30.00 (Optional)        |                                   |  |