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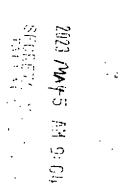
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COVER LETTER

Division of Corporations OAKS PRESERVE PROPERTIES, LLC **SUBJECT:** (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: RYAN DAUTEL (Contact Person) OAKS PRESERVE PROPERTIES, LLC (Firm/Company) 380 NW 24TH STREET (Address) MIAMI, FLORIDA 33127 (City/State and Zip Code) For further information concerning this matter, please call: HAL LUCAS (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: Street Address: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E079 (2/14)

TO:

Registration Section



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 Preserve Properties, LLC	it appears on the records of the	e Florida Department
		signed to this limited liability	company is:
4. I, FCP Holdings II	II, LLC Name of Person Resigning)	gned or will withdraw/resign i	
Class A Member			
	issociating Member or Resign	e limited liability company has	been notified my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		