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COVER LETTER

	gistration Section vision of Corporations		
1,71	vision of Corporations		
SUBJECT	BH South Dixie SL Mall LLC		
_		Limited Liability Co	mpany)
The enclos	sed member, resignation or diss	ociation and fee(s) are submitted for filing.
Please retu	ırn all correspondence concerni	ng this matter to:	
Jasmine Car	rcieri		
	(Contact Person)		_
DarrowEver	rett LLP		
	(Firm/Company)		_
One Turks I	lead Place, Suite 1200		
	(Address)		_
Providence,	R1 02903		
	(City/State and Zip Code)		_
For further	information concerning this m	atter, please call:	
Jasmine Car	cieri	401 at (453-1200
+	(Name of Contact Person)		e & Daytime Telephone Number)
Enclosed p ■ \$25 Fil	please find a check made payab ing Fee		Department of State for: g Fee & Certified Copy
	illing Address:		Street Address:
	gistration Section vision of Corporations		Registration Section Division of Corporations
P.C	D. Box 6327		The Centre of Tallahassee
Tal	llahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)



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SEUME IARY OF STATE TALLAHASSEE, FL

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)

	limited liability company as it appears on the records of the Florida Department outh Dixie SL Mall LLC
2. The Florida doci	ument/registration number assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: 4/30/2022
	, hereby withdraw/resign as a ame of Person Resigning)
Manager (MGR)	
·	(Prim Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Signature of Di	ssociating Member or Resigning Manager
	\$25.00 (Required) \$30.00 (Optional)