

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



000334946750

10/07/19--01021--018 **35.00

2019 OCT -7 AHII: 47

C GOLDEN ect 2 8 2019

TRANSMITTAL LETTER

SUBJECT: Aventura Investors (Name of Corporation) DOCUMENT NUMBER: P95000073087 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Terri Schembre (Name of Person) Aventura Beach Associates, LTD (Name of Firm/Company) 19201 Collins Avenue (Address) Sunny Isles Beach FI 33160 (City/State and Zip Code) For further information concerning this matter, please call: Terri Schembre (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Mailing Address:

Street Address:

Amendment Section Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Amendment Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, Benjamin Brecher	, hereby resign as Secretary		
	(Title)		
of Aventura Investors	s, Inc		
	of Corporation)	- `	
P95000073087 (Document Number, if known)	, a corporation organized under the laws of the State of		
FLORIDA	<u>_</u> · ·		
A.	- A	2019 <u>001</u> -	
(5	Signature of resigning officer/director)		

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314