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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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#### **COVER LETTER**

Division of Corporations	
SUBJECT: CRYDAN PROPERTIES LLC (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:	
Andrew J. Carrozzo (Contact Person)	
Crydan Properties LLC (Firm/Company)	
5671 Eastwind Drive (Address)	
Sarasota FL 34233 (City/State and Zip Code)	
For further information concerning this matter, please call:	
For further information concerning this matter, please call:  Andrew J. Carrozzz at (941) 922-1108 W  (Name of Contact Person) (Area Code & Daytime Telephone Number)  Enclosed please find a check made payable to the Florida Department of State for:  [25]  [27]  [28]  [28]  [28]  [29]  [20]  [2	
Enclosed please find a check made payable to the Florida Department of State for:  \$25 Filing Fee & Certified Copy  \$55 Filing Fee & Certified Copy	Ö

#### STREET/COURIER ADDRESS:

Registration Section

TO:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

CR2E079 (2/14)

#### **MAILING ADDRESS:**

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

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### 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)

of State is:  CRYDAN PROPERTIES LLC  2. The Florida document/registration number assigned to this limited liability company is:  LO30000 46 4 30  3. The date this member/manager withdrew/resigned or will withdraw/resign is:  (Print Name of Person Resigning)  Member  (Print Name of Person Resigning)  Member
L030000 46430
,
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 21/01/2014
AL DANIEL T CALKATZA harehuwithdraw/pair as FC
(Print Name of Person Resigning)
member
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
resignation in writing.
Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)