

L12000 127994

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** SENTINEL SOUTHERN PROPERTY, LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ILEANA NOA

Name of Person

CONCORDE LAND TITLE SERVICES, INC.

Firm/Company

134 S. DIXIE HIGHWAY, SUITE 100

Address

HALLANDALE BEACH, FL 33009

City/State and Zip Code

INOA@CONCORDELTS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ILEANA NOA

305

3568403

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**

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

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 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 limited liability company as it appears on the records of the Florida Department of State is: SENTINEL SOUTHERN PROPERTY, LLC

2. The Florida document/registration number assigned to this limited liability company is: L12000127994

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 6/30/2016

4. I, MARINA C. DE ALBUQUERQUE, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

MANAGER & MEMBER

*(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

*Marina C. Albuquerque*

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

RECEIVED  
JUL 11 2016  
11:24 PM  
OFFICE OF THE  
CLERK OF THE  
STATE  
TALLAHASSEE, FLORIDA