

L15000060840

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

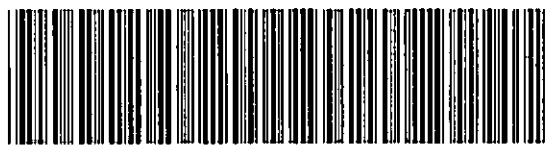
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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Dissociation of member

JAN 10 2020

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

Wynwood Gates, 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:

Cara-Jenna Kronengold, Esq.

(Contact Person)

Cara-Jenna Kronengold, P.A.

(Firm/Company)

151 N. Nob Hill Road, Suite 347

(Address)

Plantation, FL 33324

(City/State and Zip Code)

For further information concerning this matter, please call:

Cara-Jenna Kronengold, Esq.

954

658-8101

_____ at (_____) _____
(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

*Money
Order*

\$55 Filing Fee & Certified Copy

** return FedEx included*

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

** re: resignation of Elias Cababie Daniel*

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DIVISION OF CORPORATIONS
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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)

1. The name of the limited liability company as it appears on the records of the Florida Department
WYNWOOD GATES, LLC
of State is: _____

2. The Florida document/registration number assigned to this limited liability company is:
L15000060840

3. The date this member/manager withdrew/resigned or will withdraw/resign is: October 4,
Elias Cababie Daniel 2019

4. I, _____, hereby withdraw/resign as a
(Print Name of Person Resigning)

Manager

(Print Title)

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

Signature of Dissociating Member or Resigning Manager

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

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