

L150000064231

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

SEP 18 2015

MISSISSIPPI

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JERA 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:

Jennifer A. Cachon
(Contact Person)

Conroy, Conroy & Durant, P.A.
(Firm/Company)

2210 Vanderbilt Beach Road, Suite 1201
(Address)

Naples, FL 34109
(City/State and Zip Code)

For further information concerning this matter, please call:

Jennifer A. Cachon at (239) 649-5200
(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 \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

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



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: JERA PROPERTIES, LLC

2. The Florida document/registration number assigned to this limited liability company is: L15000064231

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 8/31/15

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

Manager
(Print Title)

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TALLAHASSEE, FLORIDA

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

Signature of Dissociating Member or Resigning Manager

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