

L16000128353

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

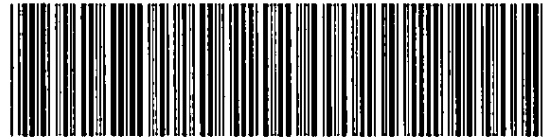
(Document Number)

Certified Copies _____ Certificates of Status _____

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Wrong form

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03/22/18--01025--003 **140.00

04/24/18--01012--007 **150.00

FILED
18 OCT -4 AM 4:20
STATE OF FLORIDA
TALLAHASSEE

SALY
OCT -4 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 28, 2018

CAROLINE D. GRIMES
7904 2ND AVE. W
BRADENTON, FL 34209

SUBJECT: SHARK LEGENDS LLC
Ref. Number: L16000128353

We have received your document for SHARK LEGENDS LLC and your check(s) totaling \$290.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Caroline D Grimes is not listed as a registered agent. She is listed as a MGR. Enclosed is the correct document to remove her as a MGR.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 018A00017920

2018 OCT -4 PM 11:13

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Shark Legends 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:

Lawrence Cavalluzzi
(Contact Person)

Salty Printing
(Firm/Company)

6030 Cortez Rd W
(Address)

Bradenton, FL 34210
(City/State and Zip Code)

For further information concerning this matter, please call:

Larry Cavalluzzi at (941) 243-3875
(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



FILED
18 OCT -4 AM 4:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Shark Legends LLC

2. The Florida document/registration number assigned to this limited liability company is:
L16000128353

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 3/19/18 original date

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

MGR
(Print Title)

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

Caroline D Grimes
Signature of Dissociating Member or Resigning Manager

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