L15000070647

. (Re	questor's Name)			
(Address)				
(Address)				
. (City/State/Zip/Phone #)				
. PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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AMASSEF, FLORIDA

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KLITZMAN LAW GROUP, PLLC

1391 SAWGRASS CORPORATE PARKWAY SUNRISE, FLORIDA 33323

LAWRENCE S. KLITZMAN LLM. TAXATION ALSO ADMITTED IN NEW JERSEY TELEPTIONE 954-384-4421 FACSIMILE 954-389-3579 E-MAILL<u>SK@KLITZLAW.COM</u>

September 9, 2015

Via Federal Express:

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

Re:

T & B 14130 Property Management LLC

T & B 201 Property Management LLC T & B 1101 Property Management LLC

Dear Sir/Madam:

Enclosed please find a check in the amount of \$75.00 together with the Manager Resignations for the above named entities. Please apply the check to the 3 accounts.

Thank you.

Very truly yours,

Lawrence S. Klitzman, Esq.

LK:nn

w/enclosures

w/check

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: T & B 14130 Property Manag	gement LLC			
(Name of Limit	ted Liability Company)			
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to:				
Lawrence S. Klitzman				
(Contact Person)				
Klitzman Law Group, PLLC				
(Firm/Company)				
1391 Sawgrass Corporate Parkway				
(Address)				
Sunrise, FL 33321				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Lawrence S. Klitzman	954 384-4421			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed please find a check made payable to the Florida Department of State for: \$\Boxed{\textit{\$\text{Piling Fee}\$}}\$ \$\Boxed{\text{\$\text{S5 Filing Fee}\$}}\$ \$\Boxed{\text{\$\text{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			

CR2E079 (2/14)



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)

	limited liability company as B 14130 Property Manage	• •	ords of the Florida Department
2. The Florida doc L1500007064	ument/registration number as 7	ssigned to this limited	d liability company is:
	ember/manager withdrew/res	_	
4. I. Daniel L. Ba	ker	, hereby withdraw/resign as a	
Manager	(ame of Person Resigning)		
	(Print Title)		
of this limited lia resignation in wr		e limited liability co	mpany has been notified of my .
Dar	iel L. Raher	,	2015 S
Signature of D	issociating Member or Resig	ning Manager	ZIII SEP 11 SECRETARY I
•	\$25.00 (Required)		P P I
Certified Copy:	\$30.00 (Optional)		25 %