

L060000 51259

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

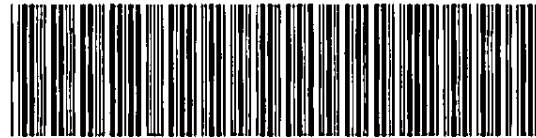
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

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03/02/20--01006--022 \*\*25.00

2020 MAY 30 AM 11:13

C. GOLDEN

MAY - 5 2020

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 1415 Charlotte Street, 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:

Michelle Berman  
(Contact Person)

\_\_\_\_\_  
(Firm/Company)

9160 EQUUS Circle  
(Address)

Boynton Beach, FL 33472  
(City/State and Zip Code)

For further information concerning this matter, please call:

Michelle Berman at ( 954 ) 465-1663  
(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

**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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 23, 2020

MICHELLE BERMAN  
9160 EQUUS CIRCLE  
BOYNTON BEACH, FL 33472

SUBJECT: 1415 CHARLOTTE STREET, LLC  
Ref. Number: L06000051259

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please enter a date that the member/manager withdrew/resigned or will withdraw/resign in number 3 of the form.

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) 245-6050.

Claretha Golden  
Regulatory Specialist II

Letter Number: 420A00006243



2020 JAN 30 AM 11:13

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: 1415 Charlotte Street, LLC

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

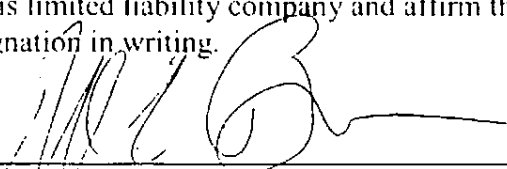
L06000051259

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/31/2019

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

MGRM  
(Print Title)

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)