

LO20000 16850

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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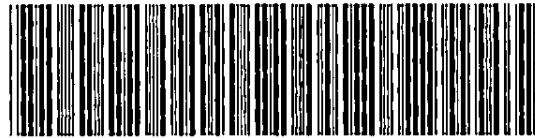
(Business Entity Name)

(Document Number)

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SECRET

C. GOLDEN

APR - 6 2019

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** University Partners of Pensacola, L.L.C.  
\_\_\_\_\_  
(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:

Brian DeMaria

\_\_\_\_\_  
(Contact Person)

University Partners of Pensacola, L.L.C.

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

21 East Garden St., Suite 200

\_\_\_\_\_  
(Address)

Pensacola, FL 32501

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Brian DeMaria

\_\_\_\_\_  
(Name of Contact Person)

at ( 850 ) 470-0961

\_\_\_\_\_  
(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

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ATTORNEYS AT LAW SINCE 1913

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SUZANNE BLANKENSHIP  
ALAN B. BOOKMAN \*  
ADAM C. COBB  
SCOT B. COPELAND \*  
ERICK M. DRUCKA \*\*\*  
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GERALD L. BROWN, RETIRED  
PATRICK G. EMMANUEL, RETIRED  
ALAN C. SHEPPARD, 1921 - 2014  
A. G. CONDON, JR., 1934 - 2011

\*Board Certified Real Estate Lawyer \*\*Board Certified Construction Lawyer  
\*\*\*Board Certified Civil Trial Lawyer \*\*\*\*Board Certified Labor and Employment Lawyer

March 21, 2019

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

Re: University Partners of Pensacola, LLC  
Resignation of Member  
Our File No.: U0076-089067

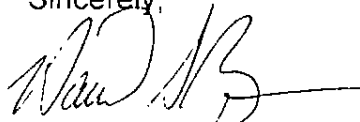
To Whom it May Concern:

Enclosed are the following:

1. Dissociation or Resignation of Member, Manager from LLC for filing, and.
2. Our firm check in the amount of \$25 payable to Florida Department of State

Please contact me directly at (850) 444-3839 should you have any questions.

Sincerely,



David S. Bright  
Paralegal for Sally B. Fox

/dsb  
Enclosures



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

**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: University Partners of Pensacola, LLC
2. The Florida document/registration number assigned to this limited liability company is:  
L02000016850
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 3/15/19
4. I, Pam Allen Del Gallo, a/k/a Pamela, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
Manager and Member  
*(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)