

L04000006115

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 26 2016  
J. HARRIS

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Fox Lake Ridge 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:

Roger J Molitor

(Contact Person)

(Firm/Company)

5417 Riveredge Drive

(Address)

Titusville, Florida 32780

(City/State and Zip Code)

For further information concerning this matter, please call:

Roger J Molitor

(Name of Contact Person)

at ( 321 ) 385 2480

(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

RJM

Roger J. Molitor

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July 20, 2016

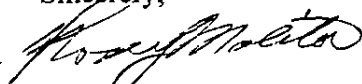
Donald L Simms  
Wickham Business Park  
2825 Business Center Blvd Suite C-1  
Melbourne, Fl. 32940

Re: Fox Lake Ridge L C

Please accept this letter as my resignation and total disassociation from  
Fox Lake Ridge L. C.

I have enclosed a copy of my resignation filed with the State of Florida.

Sincerely,



Roger J. Molitor

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5417 Riveredge Dr. Titusville, Fl.  
Phone: 321 482 3300  
Fax: 321 385 2480  
Email: RogerM1001@gmail.com



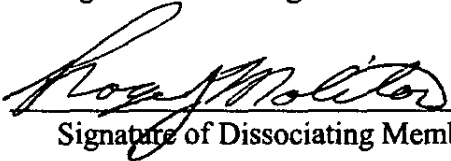
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**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: Fox Lake Ridge L.C.
2. The Florida document/registration number assigned to this limited liability company is: L04000006119
3. The date this member/manager withdrew/resigned or will withdraw/resign is: July 1, 2016
4. I, Roger J Molitor, hereby withdraw/resign as a  
(Print Name of Person Resigning)  
Managing 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)

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