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Costa & Associates

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miami lakes, fl 33014
ph: 305-827-0100
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email@costalawyers.com
www.costalawyers.com

August 4, 2015

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



Via: USPS Priority Mail Tracking Number: 9405-5102-0081-9692-7707-82

RE: Coventry Partners, LLC

FROM THE DESK OF ...

Maurice R. Costa, Esq.

ENCLOSED PLEASE FIND THE FOLLOWING:

- 1. Costa & Associates, P.A Check #2075 in the amount of \$25.00,
- 2. Cover Letter to Registration Section Division of Corporations.
- 3. Original signed Dissociation or Resignation of Member, Manager from Florida or Foreign Limited Liability Company.

COVER LETTER

	Registration Section Division of Corporations		
SUBJE			
	(Name of Lim	nited Liability Cor	mpany)
The enc	closed member, resignation or dissoci	iation and fee(s	s) are submitted for filing.
Please r	return all correspondence concerning	this matter to:	
Mauric	e R. Costa, Esq.		
	(Contact Person)		-
Costa	& Associates, P.A.		
	(Firm/Company)		_
6843 N	Main Street, Suite 302		
	(Address)		
Miami	Lakes, FL. 33014		
	(City/State and Zip Code)		-
For furt	her information concerning this matt	er, please call:	
Mauric	e R. Costa, Esq.	305 at (827-0100
	(Name of Contact Person)	(Area Code	& Daytime Telephone Number)
	ed please find a check made payable t Filing Fee		Department of State for: g Fee & Certified Copy
	CT/COURIER ADDRESS:		MAILING ADDRESS:
_	ation Section n of Corporations		Registration Section Division of Corporations
	Building		P.O. Box 6327
	xecutive Center Circle		Tallahassee, Florida 32314
Tallahas	ssee, Florida 32301		

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)

The name of the limited liability company as it appears on the records of the Florida Coventry Partners, LLC	Departmen	nt	
of State is: Coventry Partners, LLC		.•	
 The Florida document/registration number assigned to this limited liability company L04000087497 	is:		
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 7-31-	15	-	
4. I,, hereby withdraw/resign as a			
(Print Name of Person Resigning)			
Manager	·		
(Print Title) of this limited liability company and affirm the limited liability company has been not	ALLA MURS	2015 /	
resignation in writing.	ified of m	106 -7 PH 4	FILED
Signature of Dissociating Member or Resigning Manager		: 7	

\$25.00 (Required) \$30.00 (Optional)

CR2E079 (2/14)

Filing Fee: Certified Copy: