

LO5000112348

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

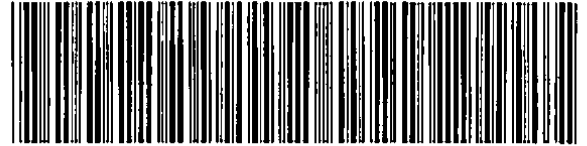
(Business Entity Name)

(Document Number)

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

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19 JUL 22 PM 5:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 22 2019

T SCHROEDER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ROEBUCK DEVELOPMENT, LLC

\_\_\_\_\_  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Amendment or Cancellation of Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph Spinelli, President

\_\_\_\_\_  
Name of Person

March Winds, Inc

\_\_\_\_\_  
Firm/Company

301 Clematis Street # 3000

\_\_\_\_\_  
Address

West Palm Beach, FL 33401

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

paidbillcentral@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph Spinelli

\_\_\_\_\_  
Name of Person

561

at (\_\_\_\_\_) \_\_\_\_\_

Area Code

543-4344

\_\_\_\_\_  
Daytime Telephone Number

**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

**AMENDMENT OR CANCELLATION OF STATEMENT OF AUTHORITY**

Pursuant to section 605.0302(2), Florida Statutes, this limited liability company submits the following:

**FIRST:** The name of the limited liability company is: Roebuck Development, LLC

**SECOND:** The Florida Document number of the limited liability company is: L05000112348

**THIRD:** The street address of the limited liability company's principal office is:

301 Clematis St # 3000

West Palm Beach, FL 33401

The mailing address of the limited liability company's principal office is:

301 Clematis St # 3000

West Palm Beach, FL 33401

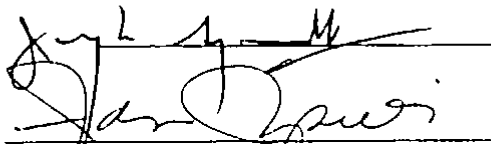
**FOURTH:** The date the statement of authority became effective is: May 17, 2019

**FIFTH:** The statement of authority is cancelled.

**OR**

The amendment to the statement of authority is

Joseph Spinelli or Adriana Spinelli

  
Signature of authorized representative

JOSEPH SPINELLI  
ADRIANA SPINELLI  
Typed or printed name of signature

**Filing Fee: \$25.00**  
**Certified Copy: \$30.00 (optional)**

**FILED**  
**19 JUL 22 PM 5:30**  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA