

C06000 120394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

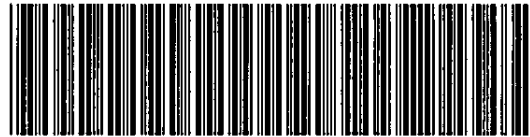
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200254912572

01/08/14--01025--005 **25.00

RECEIVED
14 JAN -8 5:11:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers JAN 10 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BARNDOLL & BAKER 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:

Joseph N Perlman
(Contact Person)

Joseph N Perlman PA
(Firm/Company)

1101 Belcher Rd S
(Address)

Largo FL 33771
(City/State and Zip Code)

For further information concerning this matter, please call:

J Perlman at (727) 536-2711
(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

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



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**RESIGNATION OR DISSOCIATION OF MEMBER, MANAGER FROM
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: BACKDOLL & BAKER LLC

2. The Florida document/registration number of this limited liability company is: L06000170384

3. The date this member withdrew or will withdraw is: JANUARY 8, 2014

4. I, RICHARD BAKER II, hereby resign as a MANAGING MEMBER
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

[Signature]

Signature of Resigning or Dissociating Manager, Member

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

FILED
14 JAN -8 AM 11:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA