

L09000087227

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Silvers MAY 05 2014

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 12, 2014

CHARLES FLETCHER  
PO BOX 82  
RIVERVIEW, FL 33568-0082

SUBJECT: IVODAT, LLC  
Ref. Number: L09000087223

We have received your document for IVODAT, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 414A00005416

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** IVODAT, 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:

CHARLES M FLETCHER

(Contact Person)

(Firm/Company)

18925 ARIPEKA ROAD # 62

(Address)

ARIPEKA, FL 34679-9801

(City/State and Zip Code)

For further information concerning this matter, please call:

CHARLES M FLETCHER

813

671-8230

at ( )

(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

**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: IVODAT, LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L09000087223

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/31/11

4. I, CHARLES M FLETCHER, hereby withdraw/resign as a  
(Print Name of Person Resigning)

MGMR

(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)

14 APR 28 AM 10:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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