

L09000107769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

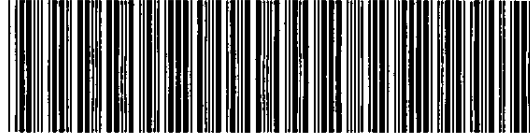
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 07 2015
BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 17, 2015

STEVEN MACKELLAR
3052 SW 27TH CT
CAPE CORAL, FL 33914

SUBJECT: MAC1613, LLC
Ref. Number: L09000107769

We have received your document for MAC1613, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person resigning and the person signing the resignation document must be the same.

Please return 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.

Tammy Hampton
Regulatory Specialist III

Letter Number: 115A00017320

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAC1613 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:

Steven MacKellar

(Contact Person)

MAC1613 LLC

(Firm/Company)

3052 SW 27th Court

(Address)

Cape Coral, FL 33914

(City/State and Zip Code)

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For further information concerning this matter, please call:

Steven MacKellar

at (239) 699-5418

(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: MAC1613 LLC

2. The Florida document/registration number assigned to this limited liability company is:
L09000107769

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 06/01/15

4. I, Eric MacKellar, hereby withdraw/resign as a
(Print Name of Person Resigning)

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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TALLAHASSEE, FLORIDA

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