

LD900009143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

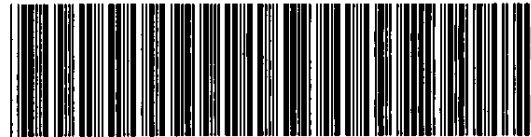
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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17 MAY -8 AM 11:05

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MAY 10 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 24, 2017

ANNIE MECIAS
15757 PINE BLVD
#196
PEMBROKE PINES, FL 33027

SUBJECT: JA & M PROPERTIES & MANAGEMENT GROUP, LLC
Ref. Number: L09000109943

We have received your document for JA & M PROPERTIES & MANAGEMENT GROUP, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please indicate the date the member/manger resigned from entity.

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

Octavia I Simmons
Regulatory Specialist II

Letter Number: 917A00007870

2017 MAY -8 PM 4:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: J A + M Properties & Management Group 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:

Annie Mecias
(Contact Person)

(Firm/Company)

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

Annie Mecias at (754) 204-6449
(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

overnight.

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

CR2E079 (2/14)

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: JAM Properties + Management Group, LLC

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

L 09 0001 09943

12/31/14

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

4. I, Jenny Mecias-Martin, hereby withdraw/resign as a
(Print Name of Person Resigning)

MEM
(Print Title)

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

[Signature]
Signature of Dissociating Member or Resigning Manager

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