

LI10000 28153

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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18 SEP -4 PM 11:15

SEP 10 2018

S. PRATHER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DENIELY PROPERTIES, 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:

BRUCE A. LAMCHICK

(Contact Person)

LAMCHICK LAW GROUP, P.A.

(Firm/Company)

9350 SOUTH DIXIE HIGHWAY, PH3

(Address)

MIAMI, FL 33156

(City/State and Zip Code)

For further information concerning this matter, please call:

BRUCE A. LAMCHICK

(Name of Contact Person)

305

670-4455

at ( )

(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

18 SEP -6 11:15

**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: DENIELY PROPERTIES, LLC.
2. The Florida document/registration number assigned to this limited liability company is:  
L11000028153
3. The date this member/manager withdrew/resigned or will withdraw/resign is: \_\_\_\_\_
4. I, ELIZABETH CUKIERMAN, hereby withdraw/resign as a  
(Print Name of Person Resigning)  
MANAGER  
(Print Title)

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

*Eduschberg*

Signature of Dissociating Member or Resigning Manager

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