

L11000049467

(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



900260215519

05/28/14--01016--001 **550.00

resignation
of MGR

FILED
2014 MAY 28 PM 2:30
SUC. CLERK OF STATE
TALLAHASSEE, FLORIDA

ADR
6/12/14

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Medallion Forty Acres, 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:

Jason Liebling

(Contact Person)

Medallion

(Firm/Company)

27805 SW 197 Avenue

(Address)

Homestead, FL 33031

(City/State and Zip Code)

For further information concerning this matter, please call:

Jason Liebling

(Name of Contact Person)

at (305) 278 9192

(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

FILED
2014 MAY 28 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: Medallion Forty Acres, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L11000049467

3. The date this member/manager withdrew/resigned or will withdraw/resign is: May 19, 2014

4. I, Richard Perlman, 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.

Signature of Dissociating Member or Resigning Manager

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