(Requestor's Name) (Address)	600327397286
(Address) (City/State/Zip/Phone #)	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	04/05/1901013015 +★S5.00
Special Instructions to Filing Officer:	2019 APR -5 AH II: 20
Office Use Only	R. WHITE

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## **COVER LETTER**

### TO: Registration Section Division of Corporations

Boca Dock and Seawall LLC SUBJECT:

(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:

James Pelloni

(Contact Person)

Boca Dock and Seawall LLC

(Firm/Company)

271 Goolsby Blvd.

(Address)

Deerfield Beach, Fl. 33442

(City/State and Zip Code)

For further information concerning this matter, please call:

James Pelloni	954	895-0340
	at (	)
(Name of Contact Person)	(Area Code	& Daytime Telephone Number)

#### 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

CR2E079 (2/14)



FILED

2019 APR - 5 AHII: 20

#### 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)

- The Florida document/registration number assigned to this limited liability company is: L11000090883

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 5-2-2019

4. I,

, hereby withdraw/resign as a *(Print Name of Person Resigning)* 

Secretary

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