## L11 0001 31950

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(7,001033)	
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(City/State/Zip/Phone #)	
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## **COVER LETTER**

TO:	_	stration Section ion of Corporations	       				
SUBJI	FCT.	MB MEADOWS	ON THE GREEN, LLC				
30001	LCI.		(Name of Limited Liability Company)				
The en	closed	l member, resignati	 on or dissociation	on and fee(s	) are submitted for filing.		
Please	return	all correspondence	concerning this	s matter to:			
CATA	LINA	BATTAGLIOLA					
	•	(Contact Per	sen)		-		
мв м	EADO	OWS ON THE GR	 REEN, LC 				
-		(Firm/Comp	dny)		_		
12400	NW	78TH MNR					
		(Address)			_		
PARK	(LANE	D, FL 33076					
		(City/State and 2	Zip Code)		-		
For fur	rther ir	nformation concern	 ing this matter, 	please call:			
CATA	LINA	BATTAGLIOLA	al	754	367-7634		
	(N	ame of Contact Perso	<del></del>	\	& Daytime Telephone Number)		
Enclos ■ \$25	•				Department of State for: Fee & Certified Copy		
Regist Division Clifton 2661 F	ration on of C 1 Build Execut	OURIER ADDRE Section Corporations ling ive Center Circle Florida 32301	SS:		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		

CR2E079 (2/14)



## FÜORIDA 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	s it appears on the records of	the Florida Department
of State is: MB	MEADOWS ON THE GRI	EEN, LLC	·
2. The Florida docu L11000131950	·	ssigned to this limited liabili	ty company is:
3. The date this me 4. I, HENRY BAT	TAGLIOLA	signed or will withdraw/resig	
(Print N	ame of Person Resigning)		g
	(Print Title)		
of this limited liab resignation in wri		ne limited liability company l	has been notified of my
Signature of Di	sociating Member or Resig	ning Manager	MI SEP 13
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		13 PH 1: 2