

L12000030606

(Requestor's Name)

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10/29/14

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ATLANTIC DRAGONSTONE, 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:

Marius Ged, Esq

(Contact Person)

Ellis, Ged & Bodden, P.A

(Firm/Company)

7171 North Federal Highway

(Address)

Boca Raton, FL. 33487

(City/State and Zip Code)

For further information concerning this matter, please call:

Kimone Hall

(Name of Contact Person)

561 910-8245  
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

## RESIGNATION

I, Jeffry ("Jeff") Zadoff hereby resign as an officer, member, manager, and employee of **ATLANTIC DRAGONSTONE, LLC**, a Florida limited Liability Company, to be effective concurrently with the execution MEMBERSHIP PURCHASE/ INDEMNIFICATION AND GENERAL RELEASE AGREEMENT.

  
Jeff Zadoff

Dated Effective: October 2, 2014

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TALLAHASSEE, FLORIDA

  
Initials



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: ATLANTIC DRAGONSTONE, LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L12000030606

3. The date this member/manager withdrew/resigned or will withdraw/resign is: Oct 2, 2014

4. I, JEFF ZADOFF, hereby withdraw/resign as a  
(Print Name of Person Resigning)

[Signature]  
(Print Title)

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

[Signature]  
Signature of Dissociating Member or Resigning Manager

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

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TALLAHASSEE, FLORIDA