



**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : JORGE L. GURIAN P.A.  
Account Number : I20010000123  
Phone : (305)931-0541  
Fax Number : (305)931-0568

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: lgurian@guhanlaw.com

FILED  
 19 MAR - 8 AM 8:50  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
OCEAN RESERVE 1614 LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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MAR 08 2019

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Corporate Filing Menu

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O SIMMONS

MAR 11 2019

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)FILED  
19 MAR -8 AM 10:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: OCEAN RESERVE 1614 LLC
2. The Florida document/registration number assigned to this limited liability company is: L12000074742
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 3/8/2019
4. I, JOSE SANTACANA, 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.

A handwritten signature in black ink, appearing to read "Jose Santacana", is written over a horizontal line.

Signature of Dissociating Member or Resigning Manager

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