## L12000015330

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DIVISION OF CORPORATIONS
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## **COVER LETTER**

TO: Registration Section **Division of Corporations** OPEN WATER VENTURES, 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: John C. Goede, Esq. (Contact Person) Goede, Adamczyk & DeBoest, PLLC (Firm/Company) 8950 Fontana Del Sol Way, Suite 100 (Address) Naples, Florida 34109 (City/State and Zip Code) For further information concerning this matter, please call: John Goede (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: ■ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301

CR2E079 (2/14)





## 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: OP	EN WATER VENTURES, LLC
2. The Florida doc L1200007533	ument/registration number assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:
4. I, Mark E. Ada	mczyk, hereby withdraw/resign as a  /ame of Person Resigning)
Manager	ame of reison kesigning)
	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Signature of D	issociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)