## 1120000 99414

/Pag					
(кеф	uestor's Name)				
	ress)				
(Add	1622)				
/A.I.4	()				
(Address)					
(0)	10: 1 7: 70				
(City/State/Zip/Phone #)					
PICK-UP	MAIT	MAIL			
(Business Entity Name)					
(Doc	ument Number)				
Certified Copies	Certificates	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



700342152707

09/18/28--81899--885 \*\*25.88

2020 H. & 16 PH 2: 29

Beoisnation

MAR 30 2020 I ALBRITTON

## **COVER LETTER**

то:	_	stration Section sion of Corporations			
	121710				
SUBJ	ECT:	1090 Building, LLC			
		(Name of Limited Liability Company)			
The er	nclosed	l member, resignation or diss	ociation and fee	(s) are submitted for filing.	
Please	return	all correspondence concerni	ng this matter to	):	
Thoma	ıs T. Coo	on, Jr., Esq.			
		(Contact Person)		_	
Capsto	ne Title	Partners, LLC			
		(Firm/Company)		<del></del>	
888 S.	Andrew	s Avenue, Suite 204			
		(Address)		_	
Fort La	uderdal	e. FL 33316			
		(City/State and Zip Code)		<del></del>	
For fu	irther in	nformation concerning this m	atter, please call	l:	
Thoma	s T. Coe	ou, Jr., Esq.	954	467-9899 	
	(N	ame of Contact Person)		le & Daytime Telephone Number)	
Enclos	sed ple	ase find a check made payabl	le to the Florida	Department of State for:	
<b>■</b> S2:	5 Filing	g Fee	□ \$55 Filir	ng Fee & Certified Copy	
		ng Address:		Street Address:	
		stration Section ion of Corporations		Registration Section Division of Corporations	
		Box 6327		The Centre of Tallahassee	
	Talla	hassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	





## 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 of State is: $\frac{1090}{1000}$	•	pears on the records of the Florida Department
2. The Florida do L12000099414	cument/registration number assigne	ed to this limited liability company is:
3. The date this m	nember/manager withdrew/resigned	or will withdraw/resign is: March 6, 2020
David C. DePadro		, hereby withdraw/resign as a
(Print	Name of Person Resigning)	
Managing Meml	her	
	(Print Title)	
of this limited li resignation in w	- · · · · · · · · · · · · · · · · · · ·	ited liability company has been notified of my
Signature of E	Dissociating Member or Resigning l	Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	