

L12000145045

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

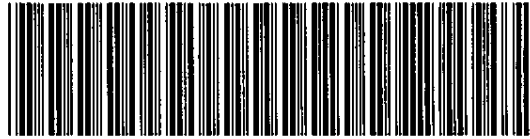
(Business Entity Name)

(Document Number)

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05/06/15--01012--018 **25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 MAY -6 AM 9:43

CC 5/20

LAW OFFICES OF

PETER J. CYR

85 BRACKETT STREET
PORTLAND, MAINE 04102

PETER J. CYR, ESQ.
DYLAN R. BOYD, ESQ.
THOMAS L. RICHARD, ESQ.

TEL.: 207-828-5900
FAX: 207-828-5909
attorneypeterjcyr.com

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

April 27, 2015

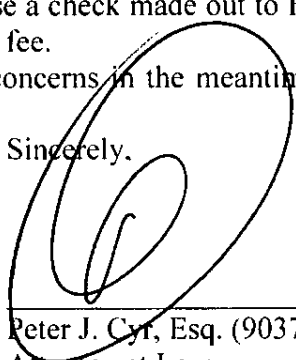
Re: S Florida Investment Properties, LLC
Dissociating and Resigning Member

To Whom it May Concern,

I have enclosed Dianne M. Leonard's executed Dissociation or Resignation of Member from Florida LLC. I further enclose a check made out to Florida Department of State in the amount of \$25.00 to cover filing fee.

Should you have any questions or concerns in the meantime, please contact my office immediately.

Sincerely,



Peter J. Cyr, Esq. (9037)
Attorney at Law
peter@peterjcyrlaw.com

Enclosure:

Cc: Dianne M. Leonard
83 Brackett Street
Portland, Maine 04102

David Goodwyn
117 NW Lucy Street
Florida City, Florida 33034

File

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: S Florida Investment Properties, 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:

Dianne M. Leonard
(Contact Person)

83 Brackett Street
(Firm/Company)
(Address)

Portland, ME 04102
(City/State and Zip Code)

For further information concerning this matter, please call:

Peter J. Cyr, Esq. at (207) 828-5900
(Name of Contact Person) (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



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SECRETARY OF STATE
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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: S Florida Investment Properties, LLC

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

L 12000145045

3. The date this member/manager withdrew/resigned or will withdraw/resign is: April 30, 2010

4. I, Dianne M. Leonard, hereby withdraw/resign as a
(Print Name of Person Resigning)

MGRM

(Print Title)

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

Dianne M. Leonard

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)

Certified Copy: \$30.00 (Optional)