

L170000 89762

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

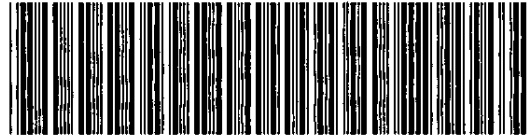
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600280665816

01/11/16--01045--020 **50.00

FILED
16 JAN 11 AM 10:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 12 2016

J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ONE Sarasota Referrals, 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:

Sara Boudarga
(Contact Person)

ONE Sarasota Referrals, LLC
(Firm/Company)

201 Fletcher Avenue
(Address)

Sarasota, Florida 34237
(City/State and Zip Code)

For further information concerning this matter, please call:

Sara Boudarga at (941) 321-6352
(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



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: DNE Sarasota Referrals, LLC

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

L13000089762

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 1/7/16

4. I, Terence J. Nutter, hereby withdraw/resign as a
(Print Name of Person Resigning)

Member manager
(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)