

L13000161364

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL 32310

*mgrm resignation*

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 112 Street Project MBH, 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:

Carolyn Rattle  
(Contact Person)

\_\_\_\_\_  
(Firm/Company)

4014 Chase Ave,  
(Address)

Miami Beach FL, 33139  
(City/State and Zip Code)

For further information concerning this matter, please call:

Carolyn Rattle at (305) 336-0604  
(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

CR2E079 (2/14)

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TALLAHASSEE, FLORIDA



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: 112 Street Project, MBTI, LLC
2. The Florida document/registration number assigned to this limited liability company is: L1300C 161364
3. The date this member/manager withdrew/resigned or will withdraw/resign is: Rafael Garofalo
4. I, RAFAEL GAROFALO, 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.

X (Signature)  
Signature of Dissociating Member or Resigning Manager

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

CR25079 (2/14)

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