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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Wilton Flats, LLC (Name of Lim	nited Liability Com	nany)
	•	
The enclosed member, resignation or dissoci	iation and fee(s)	are submitted for filing.
Please return all correspondence concerning	this matter to:	
Brian R French		
(Contact Person)		•
Trantalis & Associates		
(Firm/Company)		•
2301 Wilton Drive, Ste. C1-A		
(Address)		•
Wilton Manors, FL 33305		
(City/State and Zip Code)		•
For further information concerning this matter	er, please call:	
Brian French	954 at (566-2226
(Name of Contact Person)	_ · \	& Daytime Telephone Number)
Enclosed please find a check made payable t \$\begin{align*} \$ \$25 \text{ Filing Fee} \end{align*}		epartment of State for: 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)



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)

		<u> </u>	مسو
	e limited liability company ton Flats, LLC	as it appears on the records of the Florida Departr	
2. The Florida do	•	r assigned to this limited liability company is:	ა ა
3. The date this man 4. I, Roger Fran	nember/manager withdrew/i	resigned or will withdraw/resign is: 10 4 1	8
Manager	Name of Person Resigning,		
	(Print Title)	±•	
resignation in w		the limited liability company has been notified of	îmy
Filing Fee:	\$25.00 (Required)		

Certified Copy:

\$30.00 (Optional)