

L14000004582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

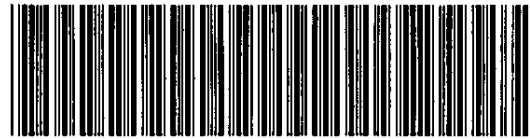
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200255282492

01/14/14--01016--022 **25.00

FILED

2014 JAN 14 PM 1:26

SECONDARY OF STATE
TALLAHASSEE, FLORIDA

JAN 17 2014

J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ELK ESTATES 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:

Kamil MARAS
(Contact Person)

ELK ESTATES LLC
(Firm/Company)

8 Leitrim Ln
(Address)

HAZLET NY 07730
(City/State and Zip Code)

For further information concerning this matter, please call:

KAMIL MARAS at (718) 757 2904
(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

STATE OF FLORIDA
TALLAHASSEE

2014 JAN 14 PM 1:26

FILED



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**RESIGNATION OR DISSOCIATION OF MEMBER, MANAGER FROM
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: ELK ESTATES LLC

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

L 14000004582

3. The date this member withdrew or will withdraw is: 1/9/14

4. I, BARBARA BANEL, hereby resign as a MGR
(Print Name of Person Resigning) (Print Title)

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

BBanel
Signature of Resigning or Dissociating Manager, Member

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

FILED
2014 JAN 14 PM 1:26
SECRETARY OF STATE
TALLAHASSEE FLORIDA