

L14000038908

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

2016 FEB 22 PM 5:34

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K. SALLY  
EXAMINER  
FEB 23

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FMB Water Front Investment Group, 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:

Gary W. Baker

(Contact Person)

FMB Water Front Investment Group, LLC

(Firm/Company)

6045 Cocos Drive

(Address)

Fort Myers, FL 33908

(City/State and Zip Code)

For further information concerning this matter, please call:

Gary W. Baker

(Name of Contact Person)

at ( 727 ) 458-2323

(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

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2016 FEB 22 PM 5:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: FMB Water Front Investment Group LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L14000038908

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 01/29/2016

4. I, Joe Orlandini, hereby withdraw/resign as a  
(Print Name of Person Resigning)

Joe Orlandini AMBR  
(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)