

L14000053926

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

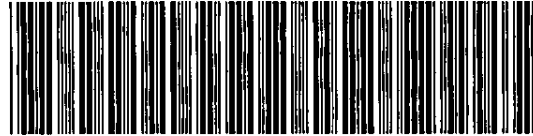
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE

mgr Resignation

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KEY WEST PUB 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:

ALAN ECKSTEIN, ESQUIRE

(Contact Person)

ALAN ECKSTEIN, P.A.

(Firm/Company)

3010 FLAGLER AVENUE

(Address)

KEY WEST, FLORIDA 33040

(City/State and Zip Code)

For further information concerning this matter, please call:

ALAN ECKSTEIN

(Name of Contact Person)

at (305) 294-2247

(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

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SECRETARY OF STATE
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: KEY WEST PUB LLC

2. The Florida document/registration number assigned to this limited liability company is:
L14000053926

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12-3-2014

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

MANAGER

(Print Title)

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

Signature of Dissociating Member or Resigning Manager

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14 DEC 24 PM 3:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ALAN ECKSTEIN, P.A.

ATTORNEY AT LAW

3010 FLAGLER AVENUE
KEY WEST, FLORIDA 33040
TELEPHONE (305) 294-2247
FACSIMILE (305) 293-9333

December 23, 2014

VIA FEDERAL EXPRESS

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: KEY WEST PUB LLC - FLORIDA DOCUMENT NUMBER: L14000053926
1114 DUVAL LLC - FLORIDA DOCUMENT NUMBER: L10000130115

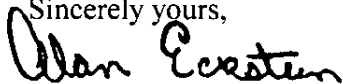
Dear Sir or Madam:

In connection with the above captioned limited liability companies, I enclose herewith originals of the Dissociation or Resignation of a Manager from both limited liability companies, along with two checks each in the amount of \$25.00, representing the costs of filing.

In connection with Key West Pub LLC, I enclose herewith an original of the Statement of Resignation of Registered Agent, along with a check in the amount of \$85.00, representing the cost of filing. After the resignation of registered agent is filed, I will be sending to you Articles of Amendment designating, among other things, a new registered agent.

Thank you for your cooperation and attention to this matter.

Sincerely yours,



Alan Eckstein

Enclosures as stated