

L14000071875

(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



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2021 MAY -4 AM 7:49

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MAY 19 2021



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2021 MAY -4 AM 11:03

SECRETARY OF STATE  
TALLAHASSEE, FL

April 5, 2021

DEICE AGREDA  
10805 NW 89 TERR  
APT 211  
DORAL, FL 33178

SUBJECT: SABRINA BP REALTY LLC  
Ref. Number: L14000071875

We have received your document for SABRINA BP REALTY LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person resigning and the person signing the resignation document must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons  
Regulatory Specialist II Supervisor

Letter Number: 021A00006965

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SABRINA BP REALTY 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:

DEICE AGREDA  
(Contact Person)

SABRINA BP REALTY LLC  
(Firm/Company)

10805 NW 89 TERR APT 211  
(Address)

DORAL, FL 33178  
(City/State and Zip Code)

For further information concerning this matter, please call:

DEICE AGREDA at ( 786 ) 216-8954  
(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

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



CR2E079-4 01/15/2021 7:49

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: BORGES MARCO

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

L14000071875

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 01/15/2021

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

AMBR  
(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

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