

L150000 48019

(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



300338949623

01/17/20--01006--020 **25.00

FILED

2020 JAN 17 PM 3:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Resignation

FEB 14 2020

I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SEVCHA PARTNERS, LLC.
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RICHARD BERCINI
Name of Person
SEVCHA PARTNERS, LLC
Firm/Company
124 Seville Chase Dr.
Address
WINTER SPRINGS, FL. 32708
City/State and Zip Code
bercini@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICHARD BERCINI at 407 492-0664
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Florida Dep't of State

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
2020 JAN 17 PM 3:50
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: Sevcha Partners, LLC

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

L15000048019

3. The date this member/manager withdrew/resigned or will withdraw/resign is: January 15, 2020

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

MGR
(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)