L15000053477

(Requestor's Name)				
(Address)				
(Ad	dress)	<u> </u>		
(Cit	y/State/Zip/Phone	e #N		
PICK-UP		MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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DEC OT 2015
J. HARRIS

2015 DEC - 7 PM 3: 41

COVER LETTER

TO: Registration Section

CR2E079 (2/14)

Divis	sion of Corporations				
SUBJECT:	BUTO VOLZ PROPERTY LL	.C			
SCHOLCI.	(Name of Limited Liability Company)				
The enclosed	d member, resignation or dissocia	ation and fee(s) are submitted for filing.		
Please return	all correspondence concerning t	his matter to:			
ROBERT E	вито				
	(Contact Person)		-		
BUTO VOL	Z PROPERTY LLC				
	(Firm/Company)		•		
1940 SE 21	ND STREET				
	(Address)		-		
POMPANO	BEACH FLORIDA 33060				
	(City/State and Zip Code)		-		
For further is	nformation concerning this matte	er, please call:			
ROBERT E	вито	954 at (650-1183		
(N	lame of Contact Person)	(& Daytime Telephone Number)		
Enclosed ple	ease find a check made payable to g Fee		repartment of State for: Fee & Certified Copy		
Registration	OURIER ADDRESS: Section Corporations		MAILING ADDRESS: Registration Section Division of Corporations		
Clifton Build	ding		P.O. Box 6327		
	ive Center Circle		Tallahassee, Florida 32314		



November 18, 2015

ROBERT BUTO 1940 SE 2ND STREET POMPANO BEACH, FL 33060

SUBJECT: BUTO VOLZ PROPERTY LLC

Ref. Number: L15000053477

We have received your document for BUTO VOLZ PROPERTY LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return 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) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 215A00024411

2015 DEC - 7 PM 3: 48



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)

	limited liability company as	s it appears on the records of the Fl	orida Department
2. The Florida doct	-	ssigned to this limited liability com	npany is:
4. I, RICHARD V	OLZ	signed or will withdraw/resign is:, hereby withdraw/resign as a	_
MANAGER	ame of Person Resigning) (Print Title)		
of this limited lia resignation in wr	bility company and affirm th	ne limited liability company has been been limited liability company has been limited liability liability.	
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)		2015 DEC -7 PH