## <u>L15000098301</u>

(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	ry/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nar	ne)			
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



800275483978

08/05/15--01009--013 \*\*25.00

15 AUG -5 PH 1: 16

AUG 1 0 2015 Y SULKER

## COVER LETTER

_	stration Section sion of Corporations					
SUBJECT:	Windemere Management, LL	.C				
	(Name of Limit	(Name of Limited Liability Company)				
The enclosed	l member, resignation or dissocia	tion and fee(s	) are submitted for filing.			
Please return	all correspondence concerning the	his matter to:				
Catherine A	A Peterson					
	(Contact Person)		_			
Windemere	e Management, LLC					
	(Firm/Company)		_			
2768 State	Rd A1A #701					
	(Address)		•			
Atlantic Bea	ach, FL. 32233					
	(City/State and Zip Code)					
For further in	nformation concerning this matter	r, please call:				
Catherine A		850	294-6914			
(N	lame of Contact Person)	(Area Code	& Daytime Telephone Number)			
Enclosed ple \$25 Filing	ease find a check made payable to g Fee		Department of State for: 3 Fee & Certified Copy			
Registration Division of C Clifton Build 2661 Execut	Corporations		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			

CR2E079 (2/14)



## 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 F	lorida Depa	artmer	nt
of State is: Wind	demere Management, LLC	>			<u>.</u> .
2. The Florida docu L1500009830	_	signed to this limited liability cor	npany is:	15 AUG	
3. The date this me	mber/manager withdrew/resi	igned or will withdraw/resign is: _	8/1/2015	_ <del>_</del>	- :
4. I, Robert J Pet		, hereby withdraw/resign as	a mg	PK	("1
(Print N	ame of Person Resigning)	<u> </u>	<del>,</del>	•••	-
AMBR			30.25 C	9	
	(Print Title)		,-		
of this limited lia resignation in wr	· · ·	e limited liability company has be	en notified	l of m	У
Ed A	M				
Signature of Di	ssociating Member or Resign	ning Manager			
•	\$25.00 (Required)				
Certified Copy:	\$30.00 (Optional)				