

L15000193342

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

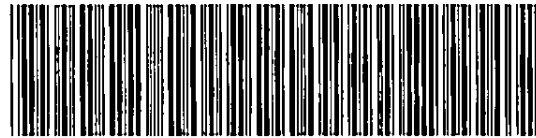
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/18/17--01008--013 **25.00

FILED

17 AUG 18 PM 4:47

DIVISION OF CORPORATIONS

O. SIMMONS
AUG 21 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 3, 2017

MARIE V. KAMPHUIS-RODRIGUEZ
551 NE 5TH STREET
POMPANO BEACH, FL 33060

SUBJECT: EL CID OF POMPANO BEACH, LIMITED LIABILITY COMPANY
Ref. Number: L15000193342

We have received your document for EL CID OF POMPANO BEACH, LIMITED LIABILITY COMPANY, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist III

Letter Number: 017A00015774

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dissolved Of Member
(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:

Marie V. Kamphuis-Rodriguez
(Contact Person)

EI CID of Pompano Beach
(Firm/Company)

551 NE 5th Street
(Address)

Pompano Beach, FL 33060
(City/State and Zip Code)

For further information concerning this matter, please call:

Rene Rodriguez Sr at (954) 709-6802
(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

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

CR2E079 (2/14)

STATE OF FLORIDA
TALLAHASSEE

2017 AUG -1 PM 1:34

2/1/17



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)

17 AUG 18 PM 4:47
DIVISION OF CORPORATIONS

FILED

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: EI CID Of Pompano Beach

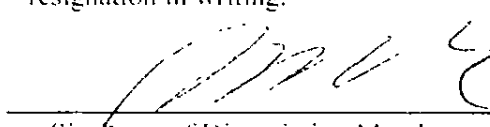
2. The Florida document/registration number assigned to this limited liability company is: L15000193342

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 07/10/2017

4. I, Marie V. Kamphuis-Rodriguez, hereby withdraw/resign as a
(Print Name of Person Resigning)

Marie V. Kamphuis-Rodriguez
(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)