

L16000035628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

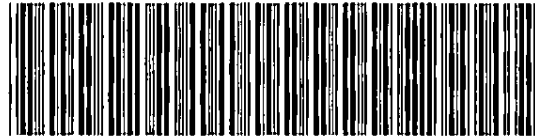
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

customer asked that
title be changed to AMOR
on 1/8/20 per phone call
w/ CW

Office Use Only



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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 18, 2019

MERLIN HUICI
SPOTLIGHT RESEARCH CENTER LLC
9570 SW 107TH AVE SUITE 201
MIAMI, FL 33176

SUBJECT: SPOTLIGHT RESEARCH CENTER LLC
Ref. Number: L16000035628

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

THE PROVIDED PRINTOUT SHOWS THOMAS R LANGE AS AN AUTHORIZED MEMBER (AMBR). PLEASE CORRECT YOUR DOCUMENT ACCORDINGLY.

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.

Susan Tallent
Regulatory Specialist II

Letter Number: 819A00025727

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Spotlight Research Center, 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:

Merlin Huici

(Contact Person)

Spotlight Research Center, llc

(Firm/Company)

9570 Sw 107th Ave Suite 201

(Address)

Miami, Fl 33176

(City/State and Zip Code)

For further information concerning this matter, please call:

Merlin Huici

(Name of Contact Person)

at 786 419-5741

(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



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: Spotlight Research Center LLC

2. The Florida document/registration number assigned to this limited liability company is:
L16000035628

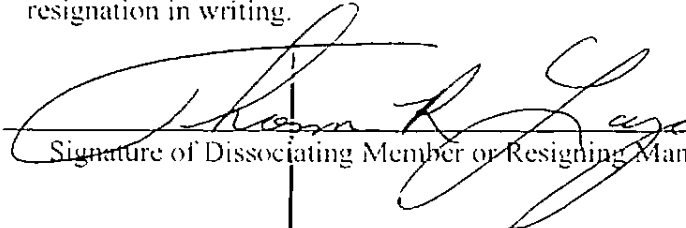
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 11/11/19

4. I, Thomas R. Lange, 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)

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STATE