

L16000077649

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

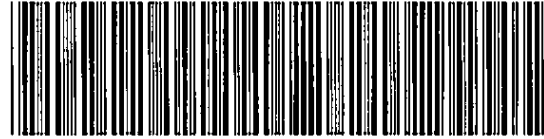
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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02/11/19--01032--021 **55.00

FILED
2019 FEB 11 AM 11:30
Submittal 13-197

Resignation/cc

FEB 16 2019

ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DATA SHELTER 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:

ROBIN ANDERSON

(Contact Person)

T4AE, INC

(Firm/Company)

24 MITCHELL CT

(Address)

ORANGE PARK, FL 32073

(City/State and Zip Code)

For further information concerning this matter, please call:

ROBIN ANDERSON

(Name of Contact Person)

954

839-4258

at (_____) _____

(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

To: Division of Corporations

From: Robin Anderson, President
T4AE, Inc.

Re: Data Shelter LLC

Date: 2/8/19

This letter is an attachment to the enclosed "Dissociation or Resignation...LLC"

Dear Sir/Madam:

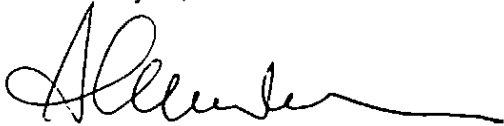
The above referenced LLC listed my corporation T4AE, Inc. as an authorized member without my permission.

Your customer service representative suggested I use this form. I have dated it to the first filing for Data Shelter LLC.

Perhaps the LLC partners confused my former Board membership or shares with being a legal member of the LLC; in any case, I affirm that I never gave approval for my corporation to become legally tied to the LLC in this manner.

Feel free to contact me if you have any questions.

Thank you,

A handwritten signature in black ink, appearing to read 'R. Anderson', with a long horizontal flourish extending to the right.

Robin Anderson, President
T4AE, Inc.
(954)839-4258



FILED
2019 FEB 11 AM 11:30
SEC. OF STATE
TALLAHASSEE, FLORIDA

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: DATA SHELTER LLC

2. The Florida document/registration number assigned to this limited liability company is:
L16000077649

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 4/19/2016

ROBIN ANDERSON / T4AE Incorporated
4. I, _____, hereby withdraw/resign as a
(Print Name of Person Resigning)

AUTHORIZED MEMBER

(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)