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## **COVER LETTER**

TO:

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Registration Section
Division of Corporations

SEAGRAPE HOMEWATCH & CONCIERGE SERVICES LLC **SUBJECT:** (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: (AMBR) KATHRYN A OWENS (Contact Person) SEAGRAPE HOMEWATCH & CONCIERGE SERVICES LLC (Firm/Company) 15171 CEDARWOOD LANE #3503 (Address) NAPLES, FLORIDA 34110 (City/State and Zip Code) For further information concerning this matter, please call: KATHRYN A OWENS (Area Code & Daytime Telephone Number) (Name of Contact Person) 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: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301



## 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)

I. The name of the limited liability company as it appears on the records of the Florida Department	
of State is: SeaGrape HomeWatch & Concierge Services LLC	
The Florida document/registration number assigned to this limited liability company is:  L16000124983	
3. The date this member/manager withdrew/resigned or will withdraw/resign is: May 11, 2017	
4. I, Brenda J. Detwiler hereby withdraw/resign as a  (Print Name of Person Resigning)  Manager Member	n =
Manager Member  (Print Title)  of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.	T
Branda L. Datiales	

Signature of Dissociating Member or Resigning Manager

Filing Fee: Certified Copy: \$25.00 (Required) \$30.00 (Optional)