

116000 152043

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

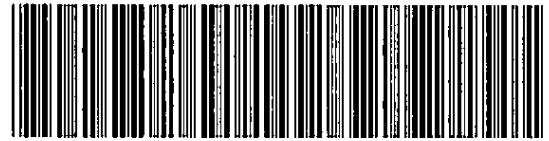
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500330268375

06/20/19--01029--005 **25.00

2019 JUN 20 PM 1:07

Signature

JUL 03 2019
ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NJN ENTERPRISES 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:

GRACE FISHTER

(Contact Person)

(Firm/Company)

271 SW 5TH STREET

(Address)

BOCA RATON, FLORIDA 33432

(City/State and Zip Code)

For further information concerning this matter, please call:

WILLIAM BEAMER

(Name of Contact Person)

at 954 561-7700

(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

2019 JUN 20 PM 1:01

**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: NJN ENTERPRISES LLC

2. The Florida document/registration number assigned to this limited liability company is:
L16000152043

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 06/19/2019

4. I, GRACE FISHTER, hereby withdraw/resign as a
(Print Name of Person Resigning)

MANAGER

(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)