

L16000 179156

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S. YOUNG

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Barrett Limited, 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:

Maurice Arcadier, Esq.

(Contact Person)

Arcadier, Biggie and Wood, PLLC

(Firm/Company)

2815 W. New Haven, 304

(Address)

Melbourne, Florida 32904

(City/State and Zip Code)

For further information concerning this matter, please call:

Maurice Arcadier at (321) 953-5998

(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



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: BARRETT LIMITED LLC

2. The Florida document/registration number assigned to this limited liability company is:
L16000179156

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 2/14/2019

4. I, NEOCO, LLC (James Munden) hereby withdraw/resign as a
(Print Name of Person Resigning)
Manager and Member
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

[Signature]
Signature of Dissociating Member or Resigning Manager

As Manager of NEOCO, LLC.

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

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