## L1700036077

| (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



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17 OCT 16 AH II: 42

## **COVER LETTER**

| -  | stration Section ion of Corporations |                 |   |  |
|--|--------------------------------------|-----------------|---|--|
| SUBJECT:   | SAFETY HARBOR LAND COMPANY LLC       |                 |   |  |
|  | (Name of Limited Liability Company)  |                 |   |  |
| The enclosed   | I member, resignation or dissocia    | ation and fee(s | s) are submitted for filing.  |  |
| Please return  | all correspondence concerning t      | his matter to:  |   |  |
| Ronald W.  | Gregory, II                          |                 |   |  |
|  | (Contact Person)                     |                 | _   |  |
| .GREGORY   | LAW FIRM, P.L.                       |                 |   |  |
|  | (Firm/Company)                       |                 | -   |  |
| 3801 Park Street North, Suite 4  |                                      |                 |   |  |
|  | (Address)                            |                 | _   |  |
| St. Petersb  | urg, FL 33709                        |                 |   |  |
|  | (City/State and Zip Code)            |                 | _   |  |
| For further information concerning this matter, please call:   |                                      |                 |   |  |
| Ronald W.  | Gregory, II                          | 727<br>at (     | 374-9200  |  |
| (N   | ame of Contact Person)               | (Area Code      | & Daytime Telephone Number)   |  |
| Enclosed please find a check made payable to the Florida Department of State for:  \$\Bigsir \text{\$\text{\$\text{25} Filing Fee}}\$\$ Certified Copy |                                      |                 |   |  |
| Registration<br>Division of C<br>Clifton Build<br>2661 Executi   | Corporations                         |                 | MAILING ADDRESS:<br>Registration Section<br>Division of Corporations<br>P.O. Box 6327<br>Tallahassee, Florida 32314 |  |

CR2E079 (2/14)



## 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: SAF                         | FETY HARBOR LAND COMPANY LLC   |
| 2. The Florida doc                       | ument/registration number assigned to this limited liability company is:               |
| L1700003607                              | 7  |
| 3. The date this me                      | ember/manager withdrew/resigned or will withdraw/resign is:                            |
| MARSHALL                                 |  |
|  | Vame of Person Resigning)  |
| Manager                                  |  |
|  | (Print Title)  |
| of this limited lia<br>resignation in wr | bility company and affirm the limited liability company has been notified of my iting. |
| 4  | 7—   |
| Signature of D                           | issociating Member or Resigning Manager  |
| Filing Fee:                              | \$25.00 (Required)   |

Certified Copy:

\$30.00 (Optional)