

17000207218

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

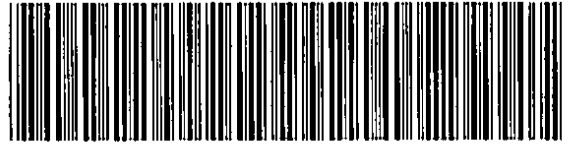
(Document Number)

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TALLAHASSEE-FLORIDA

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SEP 07 2018

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** J & F Investment Ventures, 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:

Charles H. Ball & Associates, P.A.  
(Contact Person)

Charles H. Ball & Associates, P.A.  
(Firm/Company)

1444 First Street, Suite B  
(Address)

Sarasota, FL 34236  
(City/State and Zip Code)

For further information concerning this matter, please call:

Charles H. Ball at ( 941 ) 952-1500  
(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

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TALLAHASSEE, FL 32304



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: J & F Investment Ventures, LLC

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

L17000207218

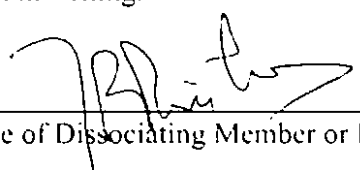
3. The date this member/manager withdrew/resigned or will withdraw/resign is: Joseph Tinho

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

AMBR

(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)

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