

**LI8000016892**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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Attorneys and Counselors at Law

OF COUNSEL  
ARLENE LAKIN  
BOARD CERTIFIED  
ELDER LAW

\* ALSO ADMITTED IN ILLINOIS

October 18, 2018

*Via Federal Express, Tracking # 7735 0864 8434  
Overnight Delivery to:*

Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Re: POMPAÑO GARDENS AT M&M ASSISTED LIVING, LLC**

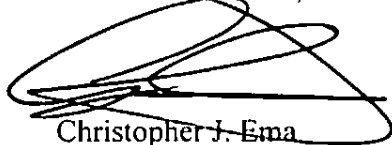
Dear Sir or Madam,

Enclosed for filing please find copies of the Dissociation or Resignation of Member, Manager From Florida or Foreign Limited Liability Company and the Articles of Amendment to Articles of Organization of Pompano Gardens at M&M Assisted Living, LLC and two checks in the amount of \$25.00 each, payable to the Florida Department of State, for the filing fees.

Should you have any questions in this regard, please do not hesitate to call my office.

Very Truly Yours,

MACLEAN & EMA, P.A.



Christopher J. Ema

Encl. as noted.




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: POMPANO GARDENS AT M&M ASSISTED LIVING, LLC
2. The Florida document/registration number assigned to this limited liability company is:  
L18000016892
3. The date this ~~member~~/manager ~~withdrew~~/resigned ~~or withdrew to resign~~ is: \_\_\_\_\_
4. I, STUART S. ROSENTHAL, hereby ~~withdrew~~/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)

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