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## **COVER LETTER**

Registration Section

**Division of Corporations** 

TO:

M & R's Florida Advisor's 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: Jav Meyers Esq. (Contact Person) J.Meyers PLLC (Firm/Company) 10055 Yamato Rd. Ste. 110 (Address) Boca Raton Fl. 33498 (City/State and Zip Code) For further information concerning this matter, please call: 886-8165 Jay Meyers (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: ■ \$55 Filing Fee & Certified Copy ☐ \$25 Filing Fee Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



## 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)

	limited liability company as	• •	of the Florida	Depa	rtment 
18000158195	iment/registration number as	-			
3. The date this me 4. I. Kape Investmen (Print N Managing Membe	mber/manager withdrew/resits LLC  Tame of Person Resigning)	gned or will withdraw/res, hereby withdraw/res	ign is: TATE STATE	31 HJ C. 5 3 176	
	(Print Title)		FL	2: 24	
of this limited lia resignation in wr	bility company and affirm the iting.	e limited liability company	y has been no	tified	of my
Signature of Di	ssociating Member or Resign	ning Manager			
_	\$25.00 (Required) \$30.00 (Optional)				