

Sep. 9. 2019 1:52PM

Louder Young Service Division of Corporations

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# L18000256354

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : LISETTE PIE SALAZAR PA  
Account Number : I20120000076  
Phone : (305)361-6161  
Fax Number : (305)361-6168

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
FLM BRICKELL VIEW LLC**

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SEP 10 2019

M. SOLOMON

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Corporate Filing Menu

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### COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FLM Brickell View 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:

Lisette Salazar, Esq  
(Contact Person)

Lisette Pie Salazar PA  
(Firm/Company)

200 Crandon Blvd. #311  
(Address)

Key Biscayne, Fl. 33149  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lisette Salazar at 305 361-6161  
(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

CR2E079 (2/14)

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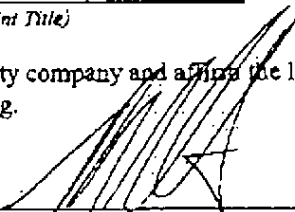
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**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: Florida
2. The Florida document/registration number assigned to this limited liability company is: L18000256354
3. The date this member/manager withdrew/resigned or will withdraw/resign is: Dec. 20, 2018
4. I, Ronald R. Fieldstone, hereby withdraw/resign as a  
(Print Name of Person Resigning)  
Manager A&L Trust Associates LLC  
(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)

CR2E079 (2/14)

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