

L190000026918

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

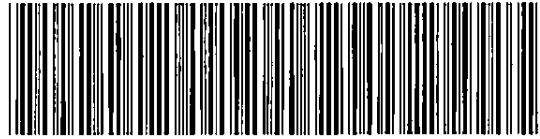
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED 2024 JUL 11 AM 7:53

2024 JUL 11 AM 7:53

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S. PRATHER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 520 GUMAIL POINTE LANE, 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:

NATALIE DOLEN (MANAGER)
(Contact Person)

(Firm/Company)

212 PINK IBIS COURT
(Address)

PONTE VEDRA BEACH, FL 32082
(City/State and Zip Code)

For further information concerning this matter, please call:

NATALIE DOLEN at (402) 3049366 (NATALIEDOLEN@ICCLLD.COM)
(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

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
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)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: 520 QUAIL POINTE LANE, LLC

2. The Florida document/registration number assigned to this limited liability company is:
83-3292859

3. The date this member/manager withdrew/resigned or will withdraw/resign is: JULY 8, 2024

4. I, Michael T. Dolen, hereby withdraw/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.

Michael T. Dolen
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

2024 JUL 11 AM 7:58
ADAMS

TRANSFER OF LLC INTEREST AND RESIGNATION

The undersigned, Michael R. Dolen, hereby transfers and assigns all of his interest in and to 520 Quail Pointe Lane, LLC and all assets owned by such LLC to Natalie M. Dolen. This transfer is pursuant to the terms of the Consent Final Judgment of Dissolution of Marriage entered into by the parties at mediation on April 25, 2024.

Michael R. Dolen does hereby resign as Manager and from any other office he holds associated with 520 Quail Pointe Lane, LLC.

Dated this ____ day of Jul 8, 2024, 2024.



Mike Dolen (Jul 8, 2024 13:32 CDT)
Michael R. Dolen