

L19 00000 96940

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500334787565

10/21/19--01043--017 **55.00

FILED
2019 OCT 21 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

V. SULKER

NOV 07 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1320 NE 9TH ST, 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:

Russell J. Ringland

(Contact Person)

1320 NE 9TH ST, LLC

(Firm/Company)

1821 Bolado Parkway

(Address)

Cape Coral FL 33990

(City/State and Zip Code)

For further information concerning this matter, please call:

Douglas Orr, Esq

(Name of Contact Person)

at (239)

565-7351

(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

10-8
R
[Signature]



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: 1320 NE 9TH ST,LLC

2. The Florida document/registration number assigned to this limited liability company is:
L19000096940

3. The date this member/manager withdrew/resigned or will withdraw/resign is: Oct 27, 2019

4. I, Charles J. Ringland SR., 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.

[Signature]
Signature of Dissociating Member or Resigning Manager

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

78
9-4-19