

K21000047819

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

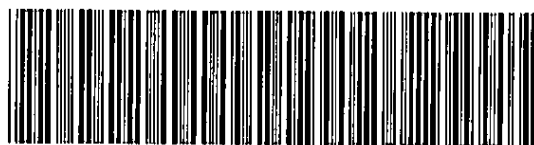
(Business Entity Name)

(Document Number)

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2021 MAY 24 AM 10:11  
STATE OF FLORIDA  
TALLAHASSEE

**CAPPELLER LAW**  
ATTORNEYS AT LAW

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4800 N. FEDERAL HIGHWAY  
SUITE D-306  
BOCA RATON, FLORIDA 33431

JOHN M. CAPPELLER, JR., P.A.  
JCAPPELLER@CAPPELLERLAW.COM

TELEPHONE 561-620-2599  
FACSIMILE 561-620-2565

May 21, 2021

Florida Department of State  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, Florida 32314

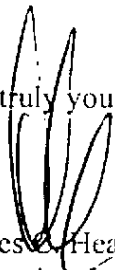
Re: Resignation of Member of 808 NE Orchid Bay Drive LLC

To whom it may concern:

Enclosed please find the completed Dissociation or Resignation of Member, Manager form Florida or Foreign Limited Liability Company for 808 NE Orchid Bay Drive LLC, along with check no. 001992 in the amount of \$25.00 made payable to the Florida Department of State.

Should you have questions or require anything further in connection with this matter, please contact us.

Very truly yours,

  
Charles W. Heartsfield  
Paralegal to John M. Capper, Jr., Esq.

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 808 NE ORCHID BAY DRIVE, 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:

Mark A. Warren

\_\_\_\_\_  
(Contact Person)

\_\_\_\_\_  
(Firm/Company)

3850 NW 2nd Ave., Unit 17

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

Boca Raton, Florida 33431

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
(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: 808 NE ORCHID BAY DRIVE, LLC

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

L21000047819

3. The date this member/manager withdrew/resigned or will withdraw/resign is: May 19, 2021

4. I, Mark A. Warren, hereby withdraw/resign as a  
(Print Name of Person Resigning)

Authorized Member

(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)

FILED  
MAY 24 AM 10:11  
TALLAHASSEE, FLORIDA