



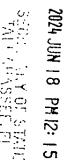
(Re	equestor's Name)	_		
(Ac	ldress)			
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(Cir	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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## **COVER LETTER**

TO: Regi	stration Section		
Divis	sion of Corporations		
SUBJECT:	HarborDreamTeam LLC	ed Liability Cor	
	(Name of Linn	ica Liability Cor	npany)
The enclosed	d member, resignation or dissocia	tion and fee(s	s) are submitted for filing.
Please return	all correspondence concerning t	his matter to:	
Marc Miles			
	(Contact Person)		_
Law Offices o	f Marc J. Miles P.A.		
	(Firm/Company)		_
333 Tamiami	Trail S. Stc. 219		
	(Address)		_
Venice, F 342	85		
	(City/State and Zip Code)		_
For further i	nformation concerning this matte	r. please call:	
Marc Miles		941 at (	468-4102
(N	Jame of Contact Person)		& Daytime Telephone Number)
Enclosed ple	ease find a check made payable to	the Florida E	Department of State for:
■ \$25 Filin	g Fee	□ \$55 Filing	g Fee & Certified Copy
Maili	ng Address:		Street Address:
	stration Section		Registration Section
Divis	sion of Corporations		Division of Corporations
	Box 6327		The Centre of Tallahassee
Talla	hassee. FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)



## 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	s it appears on the records o	of the Florida Department
2. The Florida doc L21000246043	ument/registration number a	ssigned to this limited liabi	ility company is:
3. The date this me	ember/manager withdrew/res	signed or will withdraw/res	ign is:
Drew Meyer 4. I.		, hereby withdraw/res	sign as a
	ame of Person Resigning)	,	
Member			
·	(Print Title)		
of this limited lia resignation in wr	bility company and affirm thiting.	ne limited liability company	y has been notified of my
	Men		
Signature of D	issociating Member or Resig	ning Manager	2024.
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		STANTANA STANTANA STANTANA
			PHI C