

L23 000376788

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Document Number)

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DISSOCIATION

1.

5309 N FLAGLER, LLC

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 5309 N FLAGLER, 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:

Jeffrey S. Eannarino, Esq.

(Contact Person)

EANNARINO LAW, P.A.

(Firm Company)

7000 SE Federal Highway, Suite 305

(Address)

Stuart, FL 34997

(City/State and Zip Code)

For further information concerning this matter, please call:

Jeffrey Eannarino at (561) 935-9024

(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)

2023 AUG 23 PM 3:08

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: 5309 N FLAGLER, LLC
2. The Florida document/registration number assigned to this limited liability company is:
L23000376788
3. The date this member/manager withdrew/resigned or will withdraw/resign is: August 18, 2023
4. I, BRIAN ANDRADE, hereby withdraw/resign as a
(Print Name of Person Resigning)
AMBR
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

DocuSigned by:

A handwritten signature in black ink, appearing to read "Brian Andrade", written over a horizontal line.

4F20676E6D4F407

Signature of Dissociating Member or Resigning Manager

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