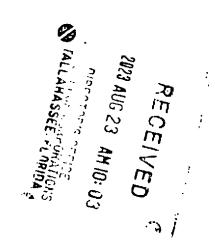
La3000376788

	(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:	





000413608270



CORPORATE ACCESS,

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	PI	CK UP:	BROOK 8/2		
X	X CERTIFIED COPY			 	
	PHOTOCOPY CUS				
XX	FILING	DIS	SOCIATION	 	
1.	5309 N FLAGLER, (CORPORATE NAME AND D	LLC OCUMENT #)		 	
2.	(CORPORATE NAME AND DO	OCUMENT #)		 	
3.	(CORPORATE NAME AND DO	OCUMENT #)		 	
4.	(CORPORATE NAME AND DO	OCUMENT #)		 	
5.	(CORPORATE NAME AND DO	OCUMENT #)		 	
6.	(CORPORATE NAME AND DO	OCUMENT #)		 	
SPECIA INSTRU	L CTIONS:				
	-				

COVER LETTER

TO: Reg	distration Section		
Div	ision of Corporations		
SUBJECT		11.	
	(Name of L	imited Liability Co	ompany)
The enclose	ed member, resignation or disso	ciation and fee(s) are submitted for filing.
Please retur	rn all correspondence concernin	g this matter to	:
Jeffrey S. Ear	nnarino, Esq.		_
	(Contact Person)		_
EANNARIN	O LAW, P.A.		
	(Firm Company)		_
2000 25 5 1			
/000 SE Fed	eral Highway, Suite 305 (Address)		_
Stuart, FL 34	997		
	(City/State and Zip Code)	<u>-</u>	
For further	information concerning this ma	tter, please call	:
Jeffrey Eanna	arino	561 at () 935-9024
()	Name of Contact Person)		e & Daytime Telephone Number)
Enclosed pl	ease find a check made payable	to the Florida	Department of State for:
☐ S25 Filir			g Fee & Certified Copy
	ing Address:		Street Address:
_	istration Section		Registration Section
	ision of Corporations		Division of Corporations
	. Box 6327 ahassee, FL 32314		The Centre of Tallahassee
ran	ana5500, 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. FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY,

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability company a	as it appears on the records of the Florida Department
of State is:	N FLAGLER, LLC	
2. The Florida doc L23000376788	ument/registration number	assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/re	esigned or will withdraw/resign is: August 18, 2023
4. 1. BRIAN ANDRADE (Print Name of Person Resigning)		, hereby withdraw/resign as a
AMBR		
	(Print Title)	
of this limited lia resignation in wr		the limited liability company has been notified of my
DocuSigned by:		
Signature of D	issociating Member or Resi	gning Manager
_	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	