(Requestor's Name)	
(Address)	
(Address)	200288398092
(City/State/Zip/Phone #)	08/12/1601006001 **25.00
(Business Entity Name)	
(Document Number) ertified Copies Certificates of Status	AUG 12 AM II-19
Special Instructions to Filing Officer:	
	NUS HARRIS

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Back to Message Resignation of J. Rothstein - 8...

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## COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: HILLSBORO, 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:

2/2

**KENNETH EDELMAN** 

(Contact Person)

EDELMAN P.A.

(Firm/Company)

2255 Glades Rd., Ste. 337W

(Address)

Boca Raton, FL 33431

(City/State and Zip Code)

For further information concerning this matter, please call:

Kenneth Edelman	561	395-0500
(Name of Contact Person)	at (	) & Daytime Telephone Number)
(Marie of Contact Ferson)	(Alea Code a	x Daytime relepitone (vuinter)

Enclosed please find a check made payable to the Florida Department of State for:

 Image: System 1
 \$25 Filing Fee
 Image: System 2
 \$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





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



## 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: HILLSBORO, LLC
- The Florida document/registration number assigned to this limited liability company is: L99000004733
- 3. The date this member/manager withdrew/resigned or will withdraw/resign is: \_\_\_\_\_August 4, 2016

, hereby withdraw/resign as a

4. I, JANICE A. ROTHSTEIN

(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.

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Signature of Dissociating Member or Resigning Manager

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

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