

M15000600998

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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15 JUL 10 PM 2:08  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

JUL 14 2015  
J. HARRIS



CoastDental

4010 W. Boy Scout Blvd., Suite 1100 | Tampa, FL 33607  
813 288 1999 | [www.coastdental.com](http://www.coastdental.com)

July 9, 2015

**Via Fedex**

Florida Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: Dissociation or Resignation of Member, Manager from Florida or Foreign Limited Liability Company

Dear Sir/Madam:

Enclosed is the original Dissociation or Resignation of Member, Manager from Florida or Foreign Limited Liability Company for **Intelident Solutions, LLC** (Fla. Registration No.: M15000000998).

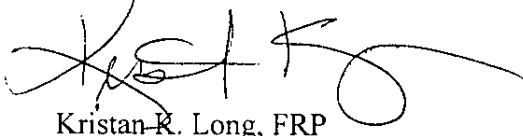
Also enclosed is the original Dissociation or Resignation of Member, Manager from Florida or Foreign Limited Liability Company for **Coast Dental Services, LLC** (Fla. Registration No.: L14000195533).

Please file these Dissociation/Resignation documents with the Secretary of State as required. Our company check #000304 payable to the Secretary of State in the amount of \$50.00 is included to cover the required filing fees.

If you have any questions, please do not hesitate to call me at (813) 288-6212 or by email at [Kristan.Long@coastdental.com](mailto:Kristan.Long@coastdental.com)

Thank you for your assistance to this matter.

Sincerely,



Kristan R. Long, FRP  
Florida Registered Paralegal

/kl

Encls.



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: INTELIDENT SOLUTIONS, LLC.

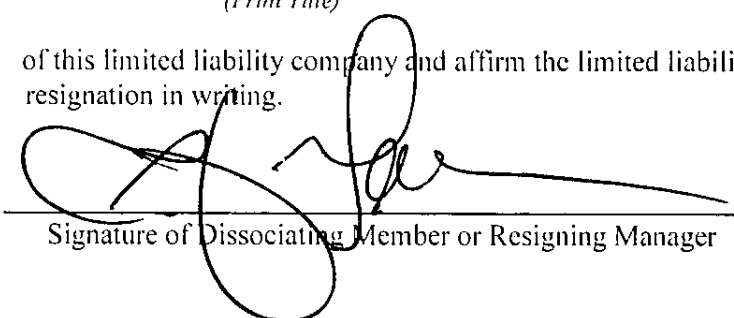
2. The Florida document/registration number assigned to this limited liability company is:  
M15000000998

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 6/1/15

4. I, THOMAS J. MARLER, hereby withdraw/resign as a  
(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.

  
Signature of Dissociating Member or Resigning Manager

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

FILED  
15 JUL 10 PM 2:08  
DIVISION OF STATE  
CORPORATIONS, FLORIDA