



**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SEAWARD, LLC  
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

ROBERT S. KLEINMAN  
(Contact Person)

ROBERT S. KLEINMAN, P.A.  
(Firm/Company)

1701 West Hillsboro Blvd., Suite 207  
(Address)

Deerfield Beach, FL 33442-1566  
(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERT S. KLEINMAN at ( 954 ) 428-5838  
(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

**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

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER  
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

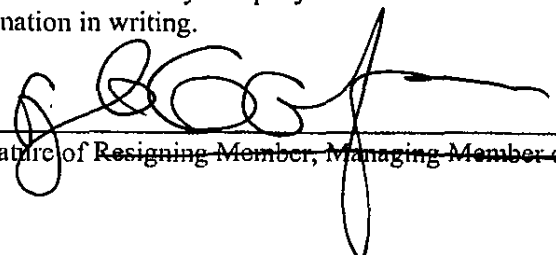
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: SEAWARD, LLC

2. This limited liability company was organized under the laws of:  
Florida

3. The Florida document/registration number of this limited liability company is:  
L02000033738

4. I, JOSEPH J. WEISENFELD, hereby resign as a MGR  
*(Print Name of Person Resigning)* *(Print Title)*

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

  
Signature of Resigning Member, Managing Member or Manager 1/3/09

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