103000014364

(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:				

Office Use Only



100200822761

04/13/11--01032--011 **100.00

FILED

II APR 13 PM 12: 39

ALLAHASSEE FSTATE

D. BRUCE

APR 14 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Freedom Boat Club, LLC (Name of Limited Liability Control of			
The enclosed member, managing member or manager resigniling.	gnation and fee(s) are submitted for	or	
Please return all correspondence concerning this matter to:			
David A. Holmes, Esquire	_		
(Contact Person)			
Farr Law Firm			
(Firm/Company)	- 		
99 Nesbit Street	ELAHA	1 APR 13	7 700
(Address)	SS:AXX		-
Punta Gorda, FL 33950	α iu⇔	(전 1) 12 12 12 12 12 12 12 12 12 12 12 12 12	
(City/State and Zip Code)	- LOKI	<i>≩</i> 39	•
For further information concerning this matter, please call:	ID A	9	
David A. Holmes, Esquire at 941	6391158 ext. 275		
(Name of Contact Person) (Area Code	e & Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida I	Department of State for: \$55 Filing Fee & Certified Copy		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314		
Tallahassee, Florida 32301	rananassee, rionna 32317		

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as i edom Boat Club LLC	t appears on the records o	f the Florida Department
2. This limited liab	ility company was organized	under the laws of:	
3. The Florida doct L03000014	ument/registration number of	this limited liability comp	any is:
4. I, Steven A.	Jones	, hereby resign as a N	Manager
	ame of Person Resigning)		(Print Title)
of this limited liab resignation in wr	pility company and affirm the ting.	limited liability company	has been notified of my
St. a.	9		
Signature of Resi	gning Member, Managing Me	ember or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		
continua copy.	φουίου (Optional)		7-1

CR2E079 (5/06)