LO8000023568

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE
ANASSEE FINA

D. BRUCE

MAY 15 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Living Water Properties, LLC			
(Name of Limited Liability	y Company)		
The enclosed member, managing member or manager filing.	resignation and fee(s) are submitted for		
Please return all correspondence concerning this matte	r to:		
Douglas Manson			
(Contact Person)			
Living Water Properties, LLC			
(Firm/Company)	LOR DA		
1101 W. Swann Avenue	ECRETARY OF STATE		
. (Address)	T = 1		
Tampa, Florida 33606	STAI FLORI		
(City/State and Zip Code)	DE G		
For further information concerning this matter, please of	call:		
Denise Rodriguez at (81	3 514-4700		
(Name of Contact Person) (Area C	Code & Daytime Telephone Number)		
Enclosed please find a check made payable to the Flori	da Department of State for: \$55 Filing Fee &		
v 423 t ming rec	Certified Copy		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations Clifton Building	Division of Corporations		
2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314		

CR2E079 (5/06)

Tallahassee, Florida 32301



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 of State is: Livi	limited liability company as ng Water Properties,	it appears on the records LLC	of the Florida Departm	ient ·
2. This limited liab Florida	ility company was organized	under the laws of:		
3. The Florida docu L08000023	ument/registration number of	f this limited liability con	apany is:	
of this limited lial resignation in wr	lame of Person Resigning) bility company and affirm th		(Print TIIIa)	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			