L09000098057

(Reque	estor's Name)
(Addre	ess)	
(Addre	ess)	
(City/S	tate/Zip/Phor	ne #)
. PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Na	агпе)
(Docui	ment Number	r) .
Certified Copies	∵ Certificate	es of Status <u>** ** ** *</u> **
Special Instructions to Fili	ng Officer:	
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FILED

SECRETARY OF STATE

SALLAHASSEE, FLORIDA

J. BRYAN

OCT 2 0 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 1528 CHARI L	
(Name of Limited Liability Company)
The enclosed member, managing filing.	member or manager resignation and fee(s) are submitted for
Please return all correspondence	concerning this matter to:
Christopher Lundstrom	
(Contact Perso	· ·
Sell to Joe, LLC	SECRETARY OF STATE AND SECRETARY OF STATE AND SECRETARY OF STATE STATE AND SECRETARY OF STATE SECRETARY OF S
(Firm/Compar	y) HAG T
	SSE
3727 SE Ocean Blvd, St	uite 200 문유 교육
(Address)	FLS 2:
Sewalls Point FL 34996	DATE ORIDA
(City/State and Zi	p Code)
For further information concerning	ng this matter, please call:
Christopher Lundstrom	at (
(Name of Contact Person	(Area Code & Daytime Telephone Number)
Enclosed please find a check made \$\frac{1}{\sqrt{25}}\$ Filing Fee	le payable to the Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRES	S: MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (5/06)



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 lin of State is: 1528	mited liability company as it ap	ppears on the records of the F	lorida D	epart	ment
2. This limited liability Florida	ty company was organized und	er the laws of:	SECRETARY	09 OCT 19	<u> </u>
3. The Florida docum L09000980	nent/registration number of this	limited liability company is:	OF STATE	PM 2:51	
4. I, Christopher	Lundstrom	, hereby resign as a Mana	ger		
	ne of Person Resigning)	(1	Print Title)	
resignation in writing			en notif	fied o	fmy
Signature of Resign	ning Member, Managing Meml	per or Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				
	e Marie Care				

CR2E079 (5/06)