

A97000002444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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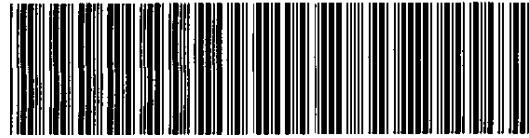
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Resign
Thur
11-23-10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sea Oaks Investment Ltd.
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A97000002444

The enclosed Resignation of Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Margaret Tripp
Contact Person

Firm/Company

1235 Winding Oaks Circle
Address

Vero Beach FL. 32963
City, State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Contact Person

at (772) 231-9828
Area Code and Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for:

☐ \$87.50 Filing Fee ☒ \$140.00 (\$87.50 Filing Fee and \$52.50 Certified Copy Fee)

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Amendment Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**RESIGNATION OF REGISTERED AGENT
FOR
LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP**

Pursuant to the provisions of section 620.1116, Florida Statutes, the undersigned,

Jacques Brion, hereby resigns as
Name of Registered Agent

Registered Agent for Sea Oaks Investment, LTP
Name of Limited Partnership or Limited Liability Limited Partnership

A97000002444
Florida Document Number, if known

The agent is terminated on the 31st day after the date on which this statement is filed by the Florida Department of State.

[Signature]
Signature of Registered Agent

If signing on behalf of an entity:

Jacques Brion
Typed or Printed Name

Agent
Capacity

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$87.50
Certified Copy (optional): \$52.50

11/11/2010