

L00000005155

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FOLEY LARDNER
ATTORNEYS AT LAW

October 30, 2002

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Nolde Partners, L.L.C.
Florida Document No. L00000005155

Dear Madam or Sir:

Enclosed please find an original and one copy of the *Resignation of Registered Agent* for the above-referenced corporation, along with our firm's check in the amount of \$50.00 payment of the filing fee for an administratively dissolved corporation. Please file the *Resignation* and place your *Filed* stamp on the enclosed copy of the *Resignation* form. Please return evidence of the filing to us in the envelope provided for that purpose.

If you have any questions, please do not hesitate to contact me.

Sincerely,


Bruce M. Rodgers

BMR/gjw
Enclosures

cc: Bart Nolde (w/encls.)
Nolde Partners, L.L.C.
44 Sandpiper Road
Tampa, FL 33609
Sarasota, Florida 34240

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DIVISION OF CORPORATIONS
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FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

November 15, 2002

BRUCE M. RODGERS
FOLEY & LARDNER
PO BOX 3391
TAMPA, FL 33609

SUBJECT: NOLDE PARTNERS, L.L.C.
Ref. Number: L00000005155

We have received your document for NOLDE PARTNERS, L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation rather than a limited liability company. Enclosed is the correct form for your entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 902A00061985

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WEST PALM BEACH

A T T O R N E Y S A T L A W

November 21, 2002

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Nolde Partners, L.L.C.
 Florida Document No. L00000005155

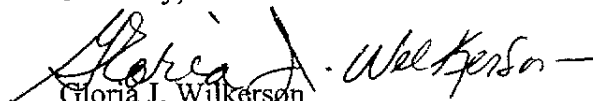
Dear Madam or Sir:

Enclosed please find an original and one copy of the *Resignation of Registered Agent for a Limited Liability Company* for the above-referenced corporation, along with your letter to us dated November 15, 2002 enclosing the correct form that needs to be submitted rather than the form we previously submitted. You are still in possession of our firm's check in the amount of \$35.00 which was to be used for the filing fee. It is our understanding that the filing fee for this form is \$25.00. We anticipate receiving a check from you in the amount of \$10.00 for overpayment of our previous filing fee.

We would ask that you please file the Resignation and place your *Filed* stamp on the enclosed copy of the Resignation form. Please return evidence of the filing to us in the envelope provided for that purpose.

If you have any questions, please do not hesitate to contact me.

Sincerely,


Gloria J. Wilkerson
Secretary for Bruce M. Rodgers

BMR/gjw
Enclosures

cc: Bart Nolde (w/encls.)
 Nolde Partners, L.L.C.
 44 Sandpiper Road
 Tampa, FL 33609

FOLEY & LARDNER
100 NORTH TAMPA STREET, SUITE 2700
TAMPA, FLORIDA 33602-5810
P.O. BOX 3391
TAMPA, FLORIDA 33601-3391

TEL: 813.229.2300
FAX: 813.221.4210
WWW.FOLEYLARDNER.COM

WRITER'S DIRECT LINE
813.225. 4106

EMAIL ADDRESS
brodgers@foleylaw.com

CLIENT/MATTER NUMBER
075896-0101

005.270614.1

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RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

BRUCE M. RODGERS

(Name of Registered Agent)

, hereby resigns as

Registered Agent for NOLDE PARTNERS, L.L.C., a Florida limited liability company

(Name of Limited Liability Company)

L00000005155

(Document Number, if known)

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.


(Signature of Resigning Agent)

If signing on behalf of an entity:

N/A

(Typed or Printed Name)

(Capacity)

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FILING FEES:

\$ 85.00	Active limited liability company
\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314