| P.O. B.  Marco  City/State                         | Requestor's Name  OX 18P  Address  Shall, Fl 34146  | Office Use Onl                                       | <b>y</b>  |
|--|---|--|---|
| 2(Co   | rporation Name)  rporation Name)  (L  | 900003590515<br>-01/29/0101113-<br>******85.00 ***** | 9 <b>0</b><br>013<br>•∗85.00                    |
| Walk in  | Pick up time  Will wait Photocopy  AMENDMENTS   | Certified Copy Certificate of Status                 | · ·   |
| Profit NonProfit Limited Liability Domestication   | Amendment  Resignation of R.A., Officer/ Dire  Change of Registered Agent  Dissolution/Withdrawal | ctor   | SECAETAR<br>DIVISION OF A                       |
| Other OTHER FILINGS: Annual Report Fictitious Name | Merger  REGISTRATION/ QUALIFICATION Foreign   | :  | HLED<br>EVENT STATE<br>CORPORATIONS<br>PM 4: 10 |
| Name Reservation                                   | Limited Partnership  Reinstatement  Trademark  Other  |  | ·   |

CR2E031(1/95)

Examiner's Initials



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 31, 2001

ROYAL TARPON YACHT CLUB 250 SAPRI BOULEVARD ISLES OF CAPPA NAPLES, EL 34113

SUBJÉCT: KEEWAYDIN ASSOCIATION, L.L.C. Ref. Number: W01000002322

We have received your document for KEEWAYDIN ASSOCIATION, L.L.C. and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Limited Liability Company must be on our records before the Registered Agent can resign, also, you must complete the highlighted areas of theapplication.

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) 487-6967.

Letter Number: 701A00005800

Michelle Hodges Document Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee Florida 32314

## 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,  |
|--|
| Chanles B. Common, hereby resigns as   |
| Registered Agent for <u>Selewayolan Association</u> , L.L.C.  1.0.Box 1815, Manes Toland, Fl. 34146  (Name of Limited Liability Company) |
| P.O. Box 1815, Manes Toland, Fl. 34146<br>(Name of Limited Liability Company)  |
| 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:   |
| (Typed or printed name)  |
| OWNER (Capacity)   |
|  |

FILING FEES:

\$ 85.00 Active Limited Liability Company
\$ 25.00 Dissolved Limited Liability Company

Division of Corporations P.O. Box 6327

Make checks payable to Florida Department of State and mail to: Tallahassee, FL 32314