

LD2000011188

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

JUL 28 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Old Corkscrew Plantation, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L02000011188

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Scott Westlake
Name of Person

Name of Firm/Company

903 E. 104th Street Suite 630
Address

Kansas City, MO 64131
City/State and Zip Code

SCWE145@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Westlake at (913) 636-2200
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

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

STREET ADDRESS:

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

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TALLAHASSEE, FLORIDA

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,

Kevin R. Lottes, Esq., c/o Porter, Wright, Morris & Arthur LLP, hereby resigns as

Name of Registered Agent

Registered Agent for _____

Old Corkscrew Plantation, LLC

Name of Limited Liability Company

L02000011188

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:

W. Jeffrey Cecil, Esq.

Typed or Printed Name

Managing Partner, PWM&A LLP

Capacity

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TALLAHASSEE, FLORIDA

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withdrawn limited liability company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