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| (Requestor's Name)       |                                       |      |  |  |  |  |
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| (Ac                      | ldress)                               |      |  |  |  |  |
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| (Ac                      | ldress)                               |      |  |  |  |  |
|                          |                                       |      |  |  |  |  |
| (City/State/Zip/Phone #) |                                       |      |  |  |  |  |
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| PICK-UP                  | ☐ WAIT                                | MAIL |  |  |  |  |
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| (Bi                      | usiness Entity Nar                    | ne)  |  |  |  |  |
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| Certified Copies         | rtified Copies Certificates of Status |      |  |  |  |  |
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| Special Instructions to  | Filing Officer:                       |      |  |  |  |  |
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Office Use Only



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SECRETARY OF STATE
JALLAHASSEE, FLORIDA

FILED

## **COVER LETTER**

| TO: Registration Section Division of Corporations                               |                                                           |
|---------------------------------------------------------------------------------|-----------------------------------------------------------|
| SUBJECT: Fish Homes, LLC (Name of Limited Liability Con                         | npany)                                                    |
| The enclosed member, managing member or manager resig filing.                   | nation and fee(s) are submitted for                       |
| Please return all correspondence concerning this matter to:                     |                                                           |
| Brian Burda (Contact Person)                                                    |                                                           |
| (Contact Person)                                                                | -                                                         |
| Dayspring Construction LLC  (Firm/Company)                                      |                                                           |
| (Firm/Company)                                                                  | ZE SE                                                     |
| 8912 Schonner Ct  (Address)  Navarre FL 32566                                   | JAN -8 P<br>CRETARY OF<br>AHASSEE, F                      |
| (Address)                                                                       | -8<br>SSE                                                 |
| Navarre FL 32566                                                                | OF S.                                                     |
| (City/State and Zip Code)                                                       | STATE LORID                                               |
| For further information concerning this matter, please call:                    | )<br>                                                     |
| Brian Burda at (850                                                             | 554-0185                                                  |
| (Name of Contact Person) (Area Code                                             | & Daytime Telephone Number)                               |
| Enclosed please find a check made payable to the Florida D \$25 Filing Fee \$\$ | Department of State for:  55 Filing Fee &  Certified Copy |
| STREET/COURIER ADDRESS:                                                         | MAILING ADDRESS:                                          |
| Registration Section                                                            | Registration Section                                      |
| Division of Corporations                                                        | Division of Corporations                                  |
| Clifton Building 2661 Executive Center Circle                                   | P.O. Box 6327                                             |
| 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         | mited liability company as it $f_{1}$ homes, LL |                        | of the Flor             | ida Dep     | oartment |
|--------------------------------|-------------------------------------------------|------------------------|-------------------------|-------------|----------|
| 2. This limited liabili        | ty company was organized u                      | nder the laws of:      | SECRETARY<br>TALLAHASSE | 2007 JAN -8 |          |
| L02(                           | nent/registration number of th                  | •                      | 윘                       | P 12: 43    | O        |
| 4. I, Stephen                  | R. McArthur<br>ne of Person Resigning)          | , hereby resign as a _ | Man a<br>(Prix          | Title)      |          |
|                                | ity company and affirm the l                    |                        |                         |             | d of my  |
| Signature of Resign            | ing Member, Managing Mer                        | mber or Manager        |                         |             |          |
| Filing Fee:<br>Certified Copy: | \$25.00 (Required)<br>\$30.00 (Optional)        |                        |                         |             |          |