## La200014607

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400088042354

02/19/07--01009--024 \*\*55.00

SECRETARY OF STATE
OVER OF CORPORATION
OF CORPORATION

## **COVER LETTER**

TO: Registration Section Division of Corporations	; ;	
SUBJECT: Sunplex Pasco Realty, LLC	C.	
(Name of Limited L		
The enclosed member, managing member or man filing.	ager resignation and fee(s) are submitted	d for
Please return all correspondence concerning this	matter to:	
Donald J. Hachenberger	,	
(Contact Person)		0; <del>1</del> ;
Sunplex Pasco Realty, LLC		07 FEB 19
(Firm/Company)		19
605 Crescent Executive Ct. #332		2
(Address)		1:52
Lake Mary, FL 32746	A STATE OF THE STA	2
(City/State and Zip Code)		
For further information concerning this matter, pl	ease call:	
Kathy Harrisat (		_
(Name of Contact Person) (A	Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the \$25 Filing Fee	Florida 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	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301	•	

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company a		ecords of	the Florida	a Departi	ment
of State is: S	unplex Pasco Realt	y, LLC		<del> </del>		•
ı	1	k say				
2. This limited liab	ility company was organiza	ed under the laws of	:			<u>2</u>
•••		<u> </u>			07 FEB	SECRI
3. The Florida docu L02000024	ment/registration number 1607	of this limited liabil	ity compa	iny is:	618	TARY
4. I, Samuel S	S. Jacobs	, hereby resig	ın as a	Manager	P <b>X</b>	OF S1/ RPOR/
(Print N	ame of Person Resigning)		· —	(Print 1	Title) 5	
of this limited lial resignation in wri	oility company and affirm iting.	the limited liability	company	has been n		=
A		-				
Signature of Resi	gning Member, Managing	Member or Manage	r			
		` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '				
Filing Fee:	\$25.00 (Required)	í				
Certified Copy:	\$30.00 (Optional)					