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(Re	questor's Name)	
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	101-1-17:- (DL	- 40
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
		_
(Bu	siness Entity Nar	mej
(Do	cument Number)	
Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	





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ANALYSISEE: FEORIDA

S. HAWKES

MAY 2 5 2010

EXAMINER

COVER LETTER

F. 12.

CR2E079 (5/06)

TO: Registration Section Division of Corporations			
SUBJECT: CIRCLE T PROPERTY (Name of Limited Liab	MANAGEMENT, LLC		
(Name of Entitled Date)	mity Company)		
The enclosed member, managing member or managing.	er resignation and fee(s) are submitted for		
Please return all correspondence concerning this ma	tter to:		
Winson J Trays (Contact Person)			
CIACLE T PROPERTY MA	MAKEMENT		
Po Boy 801 (Address)			
TND (DNTOWN TZ 3495) (City/State and Zip Code)	<u>56</u>		
For further information concerning this matter, please call:			
(Name of Contact Person) at (7)	260 - 4430 ea Code & Daytime Telephone Number)		
Enclosed please find a check made payable to the Fl	lorida 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 32301	Tallahassee, Florida 32314		



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGE

FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY 🔧	0
TO THE STATE OF TH	
1. The name of the limited liability company as it appears on the records of the Florida Department	
of State is: CIRCLE T PROPERTY MANAGEMENT LL	- ک
2. This limited liability company was organized under the laws of:	
FLORIDA .	
3. The Florida document/registration number of this limited liability company is:	
4. I, LANCE K TROUP, hereby resign as a MANACING MEMBER (Print Name of Person Resigning) (Print Title)	<u></u>
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.	
Land Many	
Signature of Resigning Member, Managing Member or Manager	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	
ospi. wood (Optional)	

CR2E079 (5/06)