L03000035000

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	ısiness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
		•		

Office Use Only



700138497507

12/10/08--01017--007 **25.00

OR OFF IN PH 1: 15

J. BRYAN
DEC 11 2008
EXAMINER

CR2E079 (5/06)

COVER LETTER

FO: Registration Section Division of Corporations	
SUBJECT: JB RANDALL, LLC	ited Liability Company)
•	manager resignation and fee(s) are submitted for
filing.	manager resignation and rec(s) are submitteet for
Please return all correspondence concerning	this matter to:
RANDALL S. SMITH	
(Contact Person)	
JB RANDALL, LLC	
(Firm/Company)	
P. O. BOX 5504	
(Address)	
DELTONA, FL 32728	
(City/State and Zip Code)	`
For further information concerning this matter	er, please call:
RANDALL S. SMITH	at (386) 860-5566
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable t	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy
	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

CR2E079 (5/06)



FI.ORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

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

	limited liability company as i	t appears on the records of the Florida Depa	 *
2. This limited liabi	lity company was organized	under the laws of:	08 DEC 10
3. The Florida docu L03000035		this limited liability company is:	7
4. I, JOHN B. S		hereby resign as a MANAGER/MEMBER	
•		e limited liability company has been notified	of my
Signature of Resi	gning Member, Managing M	ember or Manager	
J		-	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		