## W3000055901

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SECRETARY OF STATE

T. CLINE

MAR 14 2008

**EXAMINER** 

## **COVER LETTER**

Division of Corporations		
SUBJECT: Florida Pool & Spa, LLC		
(Name of Limited Liabil	ity Company)	
The enclosed member, managing member or manager filing.	r resignation and fee(s) are submitted for	
Please return all correspondence concerning this matt	er to:	
Dale Dillingham		
(Contact Person)	<del></del>	
Florida Pool & Spa		
(Firm/Company)		
PO Box 110221		
(Address)		
Naples, FL 34108		
(City/State and Zip Code)		
For further information concerning this matter, please		,
ait	$39$ $592-0267$ $\frac{ASR}{3}$ $\frac{R}{3}$	
(Name of Contact Person) (Area	Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the Flo \$25 Filing Fee	orida Department of State for:  \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations		
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle		

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

1. The name of the limited liability company as it ap of State is: Florida Pool & Spa, LLC	pears on the records of the Florida Department
This limited liability company was organized und  Florida	er the laws of:
3. The Florida document/registration number of this L03000055901	SECRE AND
4. I, Elizabeth Dillingham	, hereby resign as a Wanaging Wember
(	(1.1111.1111.1111.1111.1111.1111.1111.1111
of this limited liability company and affirm the lim	
resignation in writing.	FOR THE CO.
Elizabeth M. Wellen Ram	03
Signature of Resigning Member, Managing Memb	er or Manager

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)