

# L 040000/3379

(Requestor's Name)

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(City/State/Zip/Phone #)

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
SEP 1 2011

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LAKE PARTNERS, LLC

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

William J. Nielander

(Contact Person)

William J. Nielander, PA

(Firm/Company)

172 E. Interlake Blvd.

(Address)

Lake Placid, FL 33852

(City/State and Zip Code)

For further information concerning this matter, please call:

William J. Nielander

(Name of Contact Person)

at ( 863 ) 465-8181

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &

Certified Copy

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

FILED  
11 AUG 31 PM 12:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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


1. The name of the limited liability company as it appears on the records of the Florida Department of State is: LAKE PARTNERS, LLC

2. This limited liability company was organized under the laws of:  
the State of Florida

3. The Florida document/registration number of this limited liability company is:  
L04000013379

4. I, Salvatore A. Schiafone, hereby resign as a Managing Member  
*(Print Name of Person Resigning)* *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

  
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)