L04000035991

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





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12/03/07--01062--004 **50.00

SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: BAY WEST DEVELOPERS	S,_L.L.C	
(Name of)	Limited Liability Company)	
The enclosed member, managing member filing.	r or manager resignation and fee(s) are submitted for	
Please return all correspondence concerni	ng this matter to:	
Jacalyn N. Kolk		
(Contact Person)		
	07 DE	
Jacalyn N. Kolk, P.A.	07 DEC	
(Firm/Company)	υ ω	
Post Office Box 59462		
(Address)	PM 2: 30	
Panama City, FL 32412	3	
(City/State and Zip Code)		
For further information concerning this m	atter, please call:	
Jody Juchniewicz	at ()	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed please find a check made payab \$25 Filing Fee	le to the 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 32301	Tallahassee, Florida 32314	

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	nam	e of the limited liability company as it a	ppears on the records	of the Florida Department
of S	State	is: BAY WEST DEVELOPERS, I	L.C.	
2. Thi	s lim	ited liability company was organized und	der the laws of:	
	F1c	orida		
3. The	Flor	ida document/registration number of this	s limited liability com	pany is:
	LO	4000035991		
4 I	L.	Charles Hilton, Jr.	_, hereby resign as a _	Managing Member
,		Charles Hilton, Jr. (Print Name of Person Resigning)	_,	(Print Title)
		nited liability company and affirm the lir	nited liability compar	ny has been notified of my
Ü		e of Resigning Member, Managing Mem \$25.00 (Required)	ber or Manager	OF DEC -
		Copy: \$30.00 (Coptional)		3 F CO