L04000044693

(Re	equestor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	ry/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



500240176965

10/05/12--01020--016 **25.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

5

J. SAULSBERRY EXAMINER

OCT 8 2012

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Florida Escrow & Title Se	
(Name of Limited	Liability Company)
The enclosed member, managing member or mafiling.	inager resignation and fee(s) are submitted for
Please return all correspondence concerning this	s matter to:
Jeffrey M. Flanagan	
(Contact Person)	
Flanagan & Williard, P.A.	TA S
(Firm/Company)	
1450 Madruga Avenue, Ste 407	SECRETARY TALLAHASS
(Address)	·
Coral Gables, Florida 33146	AM & 03
(City/State and Zip Code)	
For further information concerning this matter,	please call:
Jeffrey M. Flanagan	305 444-1500
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	he Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations 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

·
2012 OCT -5
OF STATE
ember
d of my