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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CMC Title - Eastern LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Adam Guillette
(Name of Person)

CMC Title - Eastern, LLC
(Firm/Company)

230 AIA North
(Address)

Ponte Vedra Beach, FL 32082
(City/State and Zip Code)

For further information concerning this matter, please call:

Adam Guillette at (904) 280-3535
(Name of Person) (Area Code & Daytime Telephone Number)

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

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee &
Certified Copy

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 23, 2006

ADAM GUILLETTE
230 A1A NORTH
PONTE VEDRA BEACH, FL 32082

SUBJECT: CMC TITLE-EASTERN, LLC
Ref. Number: L04000046623

We have received your document for CMC TITLE-EASTERN, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas
Document Specialist

Letter Number: 506A00062794

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, W Douglas Smith, hereby resign as Managing Member
(Title)
of EMC Title Easton, LLC
(Limited Liability Company)

a limited liability company organized under the laws of the State of Florida

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

[Signature]
(Signature of resigning manager, managing member or member)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314