

**LD4000047721**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

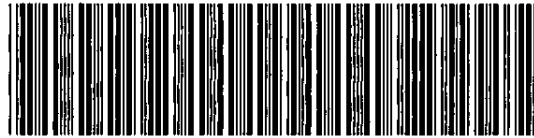
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**G. MCLEOD**

OCT 15 2008

**EXAMINER**



**600136668666**

10/14/08--01033--008 \*\*25.00

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 OCT 14 PM 3:33



## **CELEBRATION TITLE SERVICES, LLC**

*800 Celebration Ave, Suite 223, Celebration, Florida 34747*

*Phone: (407) 566-2080 / Fax: (800) 883-5504*

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September 29, 2008

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

To Whom It May Concern::

Enclosed please find a Resignation Request to be filed in connection with our company.

Should you have any questions, please do not hesitate to contact the undersigned. Please note the most effective method of communication is via email to:

[Sondra@CelebrationGroup.org](mailto:Sondra@CelebrationGroup.org).

Thank you.

Sincerely,

Sondra Sawmiller

/sms

Enclosure

### COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Celebration Title Services 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:

Edward J. OConnor

(Contact Person)

Celebration Title Services LLC

(Firm/Company)

800 Celebration Ave., Suite 223

(Address)

Celebration, FL 34747

(City/State and Zip Code)

For further information concerning this matter, please call:

Edward J. OConnor

(Name of Contact Person)

at ( 407 ) 301-1141

(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

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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 appears on the records of the Florida Department of State is: Celebration Title Services LLC

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

3. The Florida document/registration number of this limited liability company is:  
L04000047721

4. I, Pamela J. Blankenhiller, hereby resign as a MGR  
(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)

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