

,	
(Requestor's Name)	
(Address)	
(Address)	<u>. </u>
(City/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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G. MCLEOD

JUN 18 2010

EXAMINER



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10 JUN 17 PH 12: 19
JECKETARY OF STATE
ALL AHASSEE FLORING

COVER LETTER

Division of Corporations	
SUBJECT: NORTHSHORE PLAZA, LLE? (Name of Limited Liability)	Company)
The enclosed member, managing member or manager refiling.	esignation and fee(s) are submitted for
Please return all correspondence concerning this matter	to:
PETER W. van den Boom, Esq.	<u> </u>
(Contact Person)	
FROST VAN DEN BOOM & smith, B.A.	
(Firm/Company)	
P. O. BOX 2188	
(Address)	•
BARTOW, FL 33830	
(City/State and Zip Code)	:
For further information concerning this matter, please c	can.
	.) 533-0314 Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florid	da Department of State for: x \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	- winimowey a tottem war a f

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	ORTHSHORE PLAZA, LLC		:
2. This limited liab	ility company was organized	under the laws of:	,
FLORIDA		·	i
3. The Florida docu L04000048	iment/registration number of 916	this limited liability com	pany is:
4. I, TIMOTHY J	LARSON	, hereby resign as a _	CO-MANAGING DIRECTOR
Print \	lame of Person Resigning)		(Print Title)
·			
of this limited lia resignation in wr	bility company and affirm the iting. Grant Member, Managing M.		

CR2E079 (5/06)