LD4000058116

(Requestor's Na	me)
(Address)	
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(City/State/Zip/P	hone #)
PICK-UP WAIT	MAIL
(Business Entity	Name)
(Document Number)	
Certified Copies Certified	cates of Status
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SEE THE STAFF.

14 JUN 23 PH 1: 52

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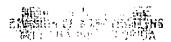
COVER LETTER

RECEIVED

14 JUN 23 PM 12: 29

TO: Registration Section Division of Corporations

CR2E079 (2/14)



SUBJECT: LBJ CONDOS, LLC		
(Name of	Limited Liability C	ompany)
The enclosed member, resignation or diss	sociation and fee	e(s) are submitted for filing.
Please return all correspondence concerni	ng this matter to) :
Rachel M Wagoner, Esq.		
(Contact Person)		_
Law Office of Gerald R Colen PA		
(Firm/Company)		
7243 Bryan Dairy Rd		
(Address)		_
Largo, FL 33777		
(City/State and Zip Code)		
For further information concerning this m	natter, please cal	1:
Rachel Wagoner	727 at (545-8114
(Name of Contact Person)		de & Daytime Telephone Number)
Enclosed please find a check made payab		-
□ \$25 Filing Fee	□ \$55 Fili	ng 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 32314
Tallahassee, Florida 32301		•



June 10, 2014

RACHEL M. WAGONER LAW OFFICE OF GERALD R. COLEN, PA 7243 BRYAN DAIRY RD LARGO, FL 33777

SUBJECT: LBJ CONDOS, LLC Ref. Number: L04000058116

We have received your document for LBJ CONDOS, 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):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

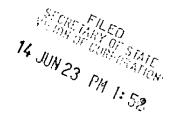
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 814A00012540





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability company as it appears on the records of the Florida Department
of State is: LBJ	CONDOS, LLC
2. The Florida docu L04000058116	ament/registration number assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: June 2, 2014
4. I, JOHN PSAL	ris hereby withdraw/resign as a
(Print N	ine of Person Resigning), hereby withdraw/resign as a
MGRM	
	(Print Title)
of this limited lial resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
John	n Pralter
Signature of Di	ssociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)