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DIVISION OF CORPORATIONS
OF MAY 26 PH 4: 55

J. BRYAN JUN - 2 2006

## TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: Lakeside Hileaway Development, L. (Name of Limited Liability Company)	C
DOCUMENT NUMBER: <u>L 04 00006 5 99 0</u>	
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are for filing.	submitted
Please return all correspondence concerning this matter to the following:	
Ellen S. Maher (Name of Person)	
Cohen & Grigsby, PC (Name of Firm/Company)	OS HA
1100 Fifth Ave. S. Ste 301 (Address)	VISION TARVORPH VISION TARVORPH VISION TARVORPH VISION TARVORPH
Waples FL 34102 (City/State and Zip Code)	PH 4: 55
For further information concerning this matter, please call:	
(Name of Person) at (239) 261-4673 (Area Code & Daytime Telephone Number)	

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

Mailing Address:
Amendment Section
Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

TO:

Amendment Section

## RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of	section 608.416	(2) or 608.5	09, Florida	Statutes, t	he undersig	ned,		
Ellen S.	Maker ne of Registered Age	Esq	•	, here	eby resigns	as		
Registered Agent for	ikes:do	H: dear	way	Develo	pnet	, LL	<u>c</u>	_
	(Name of Li	mited Liability	Company)		•			_,
L0400065 (Document Number, if	known)	above listed	limited liab	pility comp	any at its la	ıst known a	nddress	i.
The agency is terminated and	- Lu	ontinued on to		y after the	date on whi	ch this stat	ement	is filed.
If signing on behalf of an enti	ity:						06 MAY 26	SECRET DIVISION
<del></del>	(*	Typed or Printe	ed Name)		<del></del>			FILED FARYOUT F COR
<del></del>		(Capacity)					PM 4: 55	FSTATE

FILING FEES: \$ 85.00 Active \$ 25.00 Admin Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

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