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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

AFPKUVEIJ AND FILED

D. BRUCE

AUG 0 6 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: South Tampa Investment G	Group, LLC			
(Name of Limited Lie	ability Company)	-		
The enclosed member, managing member or mana filing.	ger resignation and fee(s) are submitted	d for		
Please return all correspondence concerning this m	natter to:			
Natalie R Frazier				
(Contact Person)				
Florida Orthopaedic Institute				
(Firm/Company)				
13020 Telecom Parkway North	·	SECR	12 AUG	
(Address)			<u>.</u>	-11
Temple Terrace, FL 33637		RY OF	-3 配	LEC JVNO
(City/State and Zip Code)		- F.S.	ယ္	1
For further information concerning this matter, ple	ease call:	N N N N N N N N N N N N N N N N N N N	52	
Natalie R Frazier at (813) 978-9700 ext 7397	_		
(Name of Contact Person) (A	Area Code & Daytime Telephone Number)			
Enclosed please find a check made payable to the \$25 Filing Fee	\$55 Filing 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			

CR2E079 (5/06)

Tallahassee, Florida 32301



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 of	າກາຄົສ	v as it ar	nnears or	the recor	ds of the	e Florida	Denartme	ent
	th Tampa In					<u> </u>			_•
o mile Carte d Cab	14.		د سرد الدست	ما ما ما ما ما	o 6			#	
2. This limited liabi Florida	nty company was	o grani	izea unc	ier the ta	ws or:			. ALL AI	IZ AUG
								TARY 1884	ر 1
3. The Florida docu L04000069	-	nuir be	er of this	ilmited	liability c	ompany	is:	OF ST	<u>း</u>
4. I, Roy W. Sa			ı	_, hereby	resign as	_a Mar	naging (Print Tit	Membe	
of this limited liab resignation in wri		4 (1)	n the lin	nited liab	oility com	pany has	•	•	ıy
Signature of Resignature	gning dember, M	anagi	g Meml	ber or M	anager				
Filing Fee: Certified Copy:	\$25.00 (Requii \$30.00 (Option								
		F	7						

CR2E079 (5/06)