

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE

12/13

COVER LETTER

Division of Corporations			
SUBJECT: Mediterranes At Stone L. (Name of Limited Liability Co.	Mpany)		
The enclosed member, managing member or manager resigniling.	gnation and fee(s) are submitted	for	
Please return all correspondence concerning this matter to:			
Maris Adams (Contact Person)	_		
(Contact Person)			
. (Firm/Company)	TAL	07	•
5427 Bayshau Blat	CRE TO	DEC 13 PH 12: 57	erana.
5427 Bayshau Blat (Address)	SSEC.	ა 	
Tampa Fl 33cu (City/State and Zip Code)	RETARY OF STATE AHASSEE. FLORID	112: 5	
For further information concerning this matter, please call:		نَ	
at ()		
(Name of Contact Person) (Area Code	2 & Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida last \$25 Filing Fee	Department of State for: \$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		
Tallahassee, Florida 32301			

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company diferrance Art St		s of the Florida Department
2. This limited liab	ility company was organiz	zed under the laws of:	
	ument/registration number	of this limited liability con	npany is:
4. I, Mathew (Print N	A. Adamo ame of Person Resigning)	, hereby resign as a	MGM/L (Print Title)
of this limited lial resignation in wri		the limited liability compa	ny has been notified of my
Signature of Resi	gning Member, Managing	Member or Manager	07 DE SECR TALLA
	\$25.00 (Required) \$30.00 (Optional)		DEC 13 PH 12: 5 CRETARY OF STATE AHASSEE, FLORI