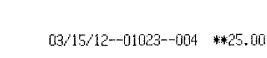
## LO4000085446

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
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(Document Number)				
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T. CLINE

MAR 1 6 2012

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Bay Investments & Develo	
(Name of Limited Li	ability Company)
The enclosed member, managing member or manafiling.	nger resignation and fee(s) are submitted for
Please return all correspondence concerning this n	natter to:
Brian E. Langford, Esquire	
(Contact Person)	
Langford & Myers, P.A.	
(Firm/Company)	
1715 W. Cleveland Street	2012 MAR 15 SECRETARN FALL ARASSI
(Address)	10 <b>3</b>
Tampa, FL 33606	112 mm
(City/State and Zip Code)	
For further information concerning this matter, pla	ease call:
Brian E. Langford, Esquire	813 , 251-5533
	Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$\sqrt{}\$25 Filing Fee	\$55 Filing Fee &
	Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 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

	imited liability company as it Investments & Develo		e Florida Department
2. This limited liabil Florida	ity company was organized u	nder the laws of:	
3. The Florida docur L040000854	ment/registration number of th	nis limited liability company	is:
4. I. Wilbur L. Br	rantley me of Person Resigning)	, hereby resign as a MG	RM (Print Title)
of this limited habi resignation in writ	lity company and affirm the ling.	imited liability company has	been notified of my
Signature of Resig	ning Member, Managing Me	nber or Manager	2012 IMP 15 SECRETARY
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		5 7 7