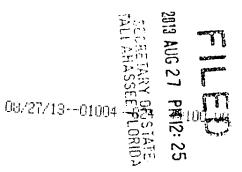
104000091958

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

Office Use Only



100251000811



AUG 28 2013

D. FRUCE

COVER LETTER

Boyett Enterprises, LLC (Name of Limited Liability Company) The enclosed member, managing member or manager resignation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: James E. Farah, Esq. (Contact Person) The Farah Law Group (Firm/Company) P.O. Box 51499 (Address) Jacksonville, Florida 32255 (City/State and Zip Code) For further information concerning this matter, please call: Jim Farah (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: ■ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations** Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301

TO:

Registration Section
Division of Corporations



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 company as i of State is: Boyett Enterprises, LLC	t appears on the records of	the Florid	la Depa	ırtmen	it
This limited liability company was organized in Florida	under the laws of:	٩	Ä	2013 /	
3. The Florida document/registration number of t L04000091958	this limited liability compa	uny is:	TARTARY OF LANASSEE FI	106 27 PM	
4. I, Wendi Boyett	, hereby resign as a Ma	anager	STATE	12: 25	S. Alberton
(Print Name of Person Resigning) of this limited liability company and affirm the resignation in writing.	limited liability company l	has been n	rme) otified		′
Signature of Resigning Member, Managing Me	ember or Manager				
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)					