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•		
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u> </u>
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
		8189
	Office Use Or	7 1 7



08/16/06--01008--009 \*\*50.00

### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Salt River Construction LLC (Name of Limited	1 Liability Company)	
Dear Sir or Madam:		
The enclosed Resignation of Member, Managing M	ember or Manager and fee(s) are submitted for filing	1g.
Please return all correspondence concerning this ma		
rease retain an correspondence concerning this ma	act to the tokowing.	
Mark Fornov		
Mark Forney (Name of Person)		- 4
		÷ O
Salt River Construction LLC		FIL 06 AUG 16
(Firm/Company)		<u> </u>
7819 N. Dale Mabry Hwy. Suite 108	XXHY THY	6 A
(Address)		<b>₹</b> Ö
T 51 00044	OFICE	AM 7:54
Tampa, Fl. 33614 (City/State and Zip Code)		<del></del>
	_	
For further information concerning this matter, please	se call:	
Mark Forney at	813 <u>935-4955</u> x-233	
(Name of Person)	(Area Code & Daytime Telephone Number)	· · <del>-</del> -
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
<b>✓</b> \$25 Filing Fee	☐\$55 Filing Fee &	
CR2E079 (8/05)	Certified Copy	



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I. Chris Beckwith	, hereby resign as Manager			
7	(Title)			-
of Salt River Construction LLC				
(Limited Liabil	lity Company)	TAS:	90	
a limited liability company organized under the la	ws of the State of Florida	12 AST	AUG 16	
and affirm that the limited liability company has b	een notified in writing of the resign	iation.	6 AM	
CE RA	<u> </u>		7:51.	
(Signature of resigning manager,	managing member or member)			

#### FILING FEE IS \$25.00

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