

105000006529

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500210221455

07/27/11--01030--009 **85.00

FILED

11 JUL 27 AM 10:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

JUL 28 2011

EXAMINER

TO: Amendment Section
Division of Corporations

DOCUMENT NUMBER: L05000006529

Please return all correspondence concerning this matter to the following:

Name of Firm/Company

Kansas City, MO 64131
City/State and Zip Code

SCWE145@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Westlake at (913) 636-2200
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
11 JUL 27 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

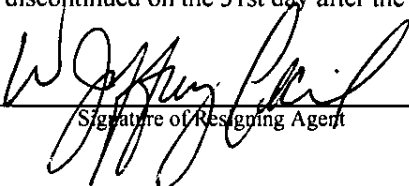
W. Jeffrey Cecil, Esq., c/o Porter, Wright, Morris & Arthur LLP, hereby resigns as
Name of Registered Agent

Registered Agent for _____
Old Corkscrew Plantation V, LLC
Name of Limited Liability Company

L05000006529
Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.


Signature of Resigning Agent

If signing on behalf of an entity:

W. Jeffrey Cecil, Esq.
Typed or Printed Name
Managing Partner, PWM&A LLP
Capacity

FILED
11 JUL 27 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

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