## 6050000088a0

(Re	equestor's Name)				
	ldress)	•			
(Au	uless)				
(Ad	dress)				
(Cit	ty/State/Zip/Phone	#)			
PICK-UP	WAIT	MAIL			
(Bu	ısiness Entity Nam	e)			
· (Do	ocument Number)	<del></del>			
(50	outrone runnson,				
Certified Copies	Certified Copies Certificates of Status				
		·····			
Special Instructions to	Filing Officer:				
		,			

Office Use Only



300112522663

11/27/07--01032--014 \*\*110.00

FILED AL

2001 NOV 27 P 3: 37

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

شركري

## **COVER LETTER**

Division of Corporations				
SUBJECT: Florigan Dive, LLC				
(Name of Limi	ted Liability Com	oany)		-
The enclosed member, managing member or filing.	manager resign	ation and fee(s)	are submitted	d for
Please return all correspondence concerning	this matter to:			
Kim Roney				
(Contact Person)			ZI S	
Florigan Dive, LLC			IDT NOV	7
(Firm/Company)			27 AR) (SSE	
11833 Overseas Highway			2001 NOV 27 P 3: 37 SECRETARY OF STATE ALLAHASSEE, FLORIDA	
(Address)			) 2 3 3 3 3	
Marathon, Florida 33050			<b>&gt;</b> '' —	
(City/State and Zip Code)				
For further information concerning this matter	er, please call:			
Kim Roney	at ( 305	743-2444		_
(Name of Contact Person)	(Area Code d	& Daytime Telep	hone Number)	_
Enclosed please find a check made payable to \$25 Filing Fee		epartment of Sta 55 Filing Fee & Certified Cop		
STREET/COURIER ADDRESS:		MAILING AD	DRESS:	
Registration Section		Registration Section		
Division of Corporations		Division of Corporations		
Clifton Building		P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301		Tallahassee, Flo	orida 32314	

CR2E079 (5/06)



## 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 of State is: Flor	limited liability company as it igan Dive, LLC	appears on the records	of the Flo	orida D	epartment
2. This limited liabi Florida	lity company was organized u	nder the laws of:	SECRETAR) TALLAHASSI	2001 NOV 27	ALCOHOLD STATEMENT
3. The Florida docu <u>L05000008</u>	ment/registration number of the 820	nis limited liability con	npanylorida E. Jorida	ا3 يو ط ا3 يو	
4. I, Dan R. Dav	vies	, hereby resign as a	Manag	ing M	1ember
(Print Name of Person Resigning)		,	(Print Title)		
of this limited liab resignation in write	ility company and affirm the ling.	imited liability compar	ny has bee	n notif	ied of my
Signature of Resig	gning Member, Managing Me	mber or Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				