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COVER LETTER

TO: Registration Section

CR2E079 (5/06)

Division	of Corporations		-		
SUBJECT:	CAPE WATE	ER SERVIC	E, LLC		
(Name of Limited Liability Company)					
The enclosed me filing.	ember, managing member of	r manager resig	nation and fee(s) are	submitted for	
Please return all	correspondence concerning	this matter to:	-		
Ra	ynold G. MacPherso	on			
(Contact Person)			-		
				TA'S	
Car	oe Water Service, LL	.C		Z S	
	(Firm/Company)		<u> </u>	SEP -7 PM 1: L ECRE HAND DE STATI LAHASSEE, FLORII	
	, , , , ,			1. S.S.	
1:	902 S.E. 14th Street			M-*	
	(Address)	<u> </u>	_	=₹	
	-			52 ÷	
Can	e Coral, Florida 339	90		一部 元	
	(City/State and Zip Code)		-	-⊅	
	(City/Suite and Lip Code)		_		
For further infor	mation concerning this mat	ter, please call:	-		
Raynolo	d G. MacPherson	at (239	, 458-4848		
(Name	of Contact Person)	(Area Code	& Daytime Telephon	e Number)	
	find a check made payable \$25 Filing Fee		Department of State 1355 Filing Fee & Certified Copy	for:	
STREET/COU	RIER ADDRESS:		MAILING ADDR	ESS:	
Registration Sec	_		Registration Section		
Division of Corp		Division of Corporations			
Clifton Building			P.O. Box 6327		
2661 Executive			Tallahassee, Florid	a 32314	
Tallahassee, Flo	rida 32301				



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	he limited liability company as Cape Water Service, L		f the Florida Department
	ability company was organized State of Florida	l under the laws of:	
	ocument/registration number of 5000014247	f this limited liability comp	any is:
4. I, Se	cott A. Storath	, hereby resign as a	Manager
	t Name of Person Resigning)	neroby resign as a	(Print Title)
resignation in v	iability company and affirm the writing. Make the state of the state	-	has been notified of my
Filing Fee:	* \$25 00 (Paguirad)	·	TA'S
Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		TECHT
oriuma copy,	- voco (opuomu)	-	新 罗
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CR2E079 (5/06)			2. n −