

L05 000019478

(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:



900058328959

08/08/05--01014--018 **2500

FILED

2005 AUG -8 A 9:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office Use Only

Document Number	DOC
Updat	DOC
it	DOC
	DOC

ALBERT J. STOPKA, III, P.A.
ATTORNEY AT LAW
P. O. Box 300
108 MOSLEY DRIVE
LYNN HAVEN, FL 32444

TELEPHONE: (850) 785-8600

FACSIMILE: (850) 872-9158

August 4, 2005

Florida Secretary of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32301

RE: Pro-Team Realty Group, LLC
Our File No. 974.1

To Whom It May Concern:

Enclosed please find the following in connection with the above-referenced:

1. Resignation of Member, Managing Member or Manager - \$25.00
2. Member's check no. 2163 in the amount of \$25.00 to cover the cost of filing.

Please update your records with the enclosed resignation as soon as possible.

Thank you very much for your assistance with this matter and should you have any questions, please do not hesitate to give me a call collect.

Sincerely,

ALBERT J. STOPKA, III

Mary Boyd, Paralegal
to Albert J. Stopka, III

2005 AUG -8 A 9:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

/mb
Enclosure(s)

cc: Mr. William L. Terry

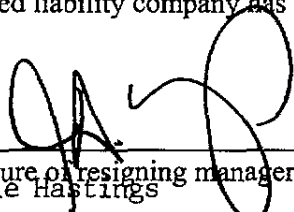
RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, JOHNNIE HASTINGS, hereby resign as MEMBER/MANAGING MEMBER
(Title)

of PRO-TEAM REALTY GROUP, LLC,
(Limited Liability Company)

a limited liability company organized under the laws of the State of FLORIDA,

and affirm that the limited liability company has been notified in writing of the resignation.


(Signature of resigning manager, managing member or member)
Johnnie Hastings

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

FILED
2005 AUG - 8 A 9 57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA
COUNTY OF BAY

The foregoing instrument was acknowledged before me this 21 day of June,
2005, by JOHNNIE HASTINGS, who: (notary **must** check applicable box)

- ☐ is personally known to me.
☒ produced a current Florida driver's license as identification.
☐ produced _____ as identification.

H235-461-53-284-0
8-04-11

(SEAL)

Kristi L. McLaughlin
Kristi L. McLaughlin

(Print Name)

Notary Public

Serial # _____

My Commission Expires: _____

State of: Florida

County of: Okaloosa



FILED
2005 AUG - 8 A 9:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA