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SEGRETARIO DE STATE
TALLAHASSEE, FLORIDA

B. BOSTICK
UN 1 0 2011
EXAMINER

6-8-11

#### **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: Willis Real Estate Group 24C
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Lyndall Thomas Shrewsbury (Contact Person)	
(Firm/Company)	
580/ S. Crater lake Cir.	TALLAH
Reystone Heights FL 32656 (City/State and Zip Code)	SEE
For further information concerning this matter, please call:	LORIDA

Self at (904) 403-530/
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

\$25 Filing Fee 
Certified Copy

#### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

**MAILING ADDRESS:** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 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

	e limited liability company as in $1/1/5$ $Real$ $FS$			ment 
2. This limited liab	pility company was organized u	ınder the laws of:		
3. The Florida doc LOS 000	ument/registration number of to 1022/90	his limited liability com	pany is:	
4. I, <u>Lyndall</u> 7 (Print N	homus Shrcwsbury  Jame of Person Resigning)	, herreby resign as a _	Manage (Print Title)	<u>n</u> lmgam
of this limited lial resignation in wri	bility company and affirm the liting.	imited liability company	y has been notified of	my
Signature of Resi	gning Member, Managing Mer	nber or Manager	TAI	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		LLAHASSEE A	Contained of the contai

CR2E079 (5/06)