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(80	equestor's Name)	
(Ac	idress)	
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(Ac	idress)	
(Ci	ty/State/Zip/Phone	<i>#</i>)
PICK-UP	☐ WAIT	MAIL
(Вь	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
Resign		
	Office Use Onl	y



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- Development
- Engineering
- Construction

February 14, 2007

Florida Department of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Willis Smith/FMO,LLC

To Whom It May Concern:

Enclosed you will find the following documents submitted for filing:

- 1. Resignation of David E. Sessions, Manager
- 2. Resignation of John F. Lacivita, Manager
- 3. Articles of Amendment changing entity name to: Compass Homes, LLC

Please process these at your earliest convenience. If you have any questions please do not hesitate to contact me at (941) 364-9285.

Sincerely,

Brenda Creech

Brenda Creech

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Willis Smith / FMO (Name of Limited Liability Compa	Rny)
The enclosed member, managing member or manager resignatiling.	ation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
W. Todd Menke (Contact Person)	
FMO Companies, Trc. (Firm/Company)	
1515 Ringling Blud, #890	
Sarasota, FL 34234 (City/Stale and Zip Code)	
For further information concerning this matter, please call:	
(Name of Contact Person) (Area Code &	364-9285 Daytime Telephone Number)
Enclosed please find a check made payable to the Florida De \$25 Filing Fee	partment of State for: 5 Filing Fee & Certified Copy
Registration Section F Division of Corporations I Clifton Building F	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, Florida 32314

FEB 1 4 2007



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 limited liability company as it a	ppears on the records of	f the Florida Department
of State is: Willis Smith / FMC	7, 440	•
2. This limited liability company was organized und		
3. The Florida document/registration number of this	s limited liability compa	any is:
4. I, David E. Sessions (Print Name of Person Resigning)	_, hereby resign as a	Manager (Print Title)
of this limited liability company and affirm the lir resignation in writing.	nited liability company	has been notified of my
Signature of Resigning Member, Managing Mem		

Filing Fec:

\$25.00 (Required) \$30.00 (Optional)

Certified Copy:

CR2E079 (5/06)