

LD50000032740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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APR - 3 2008

**EXAMINER**

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2008 APR -2 PM 12:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

Law Offices  
of  
**GONANO & HARRELL**  
A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS  
ATTORNEYS AND COUNSELORS AT LAW

DOUGLAS E. GONANO  
Board Certified Real Estate Lawyer  
email: dgonano@gh-law.com

RIVERSIDE NATIONAL BANK BUILDING  
1600 South Federal Highway, Suite 200  
Fort Pierce, Florida 34950-5194  
Telephone (772) 464-1032  
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DANIEL B. HARRELL  
email: dharrell@gh-law.com

MOLLY L. ROTTINGHAUS  
email: mrottinghaus@gh-law.com

March 28, 2008

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

RE: 4 J's Limited Liability Company

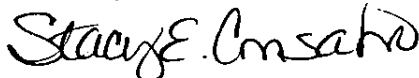
To Whom It May Concern:

Enclosed please find the following:

1. Cover Letter;
2. Resignation of Member, Managing Member of Manager of Florida Limited Liability Company;

Also enclosed is this firm's trust account in the amount of \$25.00 in payment of the filing fee.

Sincerely,



Stacy E. Consalvo  
Legal Assistant to  
Douglas E. Gonano, Esquire

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 4 J'S LIMITED LIABILITY COMPANY

(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:

Douglas E. Gonano, Esquire

(Contact Person)

Gonano & Harrell

(Firm/Company)

1600 S. Federal Highway, Suite 200

(Address)

Fort Pierce, Florida 34950

(City/State and Zip Code)

For further information concerning this matter, please call:

Douglas E. Gonano

(Name of Contact Person)

at ( 772 ) 464-1032

(Area Code & Daytime Telephone Number)

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

☒ \$25 Filing Fee

☐ \$55 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



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 appears on the records of the Florida Department of State is: 4 J'S LIMITED LIABILITY COMPANY

2. This limited liability company was organized under the laws of:  
FLORIDA

3. The Florida document/registration number of this limited liability company is:  
L05000032740

4. I, JEFF S. MIRET, hereby resign as a Manager  
*(Print Name of Person Resigning)* *(Print Title)*

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

A handwritten signature in black ink, appearing to read "JEFF S. MIRET", is written over a horizontal line.

Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

2008 APR -2 PM 12: 58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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