L05000033745

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
<u></u>		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Heartland Ranchettes, LL0	C
(Name of Limited L	iability Company)
The enclosed member, managing member or man filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
Mose B. Joiner	
(Contact Person)	·
Heartland Ranchettes, LLC	07 07
(Firm/Company)	APR APR
5092 Leeward Way	<u> </u>
(Address)	
Orlando, FL 32809	07 APR 16 AM 10: 5
(City/State and Zip Code)	
For further information concerning this matter, p	lease call:
Mose B. Joiner	863 763-2262
(Name of Contact Person)	Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	Florida Department of State for: \$55 Filing Fee &
	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
2001 Excentive Center Circle	rananassee, riorida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



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 apports of State is: Heartland Ranchettes, LLC.	pears on the records of the Florida De	partment
2. This limited liability company was organized unde	r the laws of:	8£ 01V/18 07
3. The Florida document/registration number of this language L05000033715	imited liability company is:	APR 16 AP
4. I, Mose B. Joiner (Print Name of Person Resigning)	hereby resign as a Mgrm (Print Title)	STATE ORATION
of this limited liability company and affirm the limi resignation in writing.	,	ed of my
Signature of Resigning Member, Managing Member	er or Manager	
Filing Fee: \$25.00 (Required)		

Certified Copy:

\$30.00 (Optional)