L05000038308

(Re	equestor's Name)	
(Ac	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT .	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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07/19/07--01009--032 **175.00

SECRETARY OF STATE
DIVISION OF STATE
OF THE TO AM 9: L

COVER LETTER

TO:	Amendment Section Division of Corporations	
	Division of Corporations	
SUBJI	ECT: Emerald Coast Water Authority LLC	
	(Name of Corporation)	
DOCU	UMENT NUMBER: L05000038308	
Γhe en	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for fil	ling.
Please	return all correspondence concerning this matter to the following:	
DON	I A MADDEN, JR	
	(Name of Person)	
Eme	rald Coast Water Authority LLC	
	(Name of Firm/Company)	
16 F	ERRY RD SE	
	(Address)	
FOR	T WALTON BEACH FL 32548	
	(City/State and Zip Code)	
For fu	rther information concerning this matter, please call:	
Ginge	er L. Barry at (850) 269-0148	
	(Name of Person) (Area Code & Daytime Telephone Number)	

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections of	07.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Gir	nger L. Barry
, , ,	(Name of Registered Agent)
hereby resigns as Registered Agent for	Emerald Coast Water Authority LLC
	(Name of Corporation)
L05000038308	
(Document Number, if known)	_
A copy of this resignation was mailed to	o the above listed corporation at its last known address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date on which
\bigcup	gnature of Resigning Agent)
If signing on behalf of an entity:	Typed or Printed Name)
	Typed or Printed Name)
	(Capacity)

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314



215 SOUTH MONROE STREET
SUITE 400
P.O. DRAWER 11300
TALLAHASSEE, FLORIDA 32301
TELEPHONE: 850.681.6810
FACSIMILE: 850.681.9792
www.broadandcassel.com

VICKI L. CAUSSEAUX, PARALEGAL
DIRECT LINE: (850)205-3306
DIRECT FACSIMILE: (850) 521-1468
EMAIL: vcausseaux@broadandcassel.com

July 17, 2007

Division of Corporations Amendment Section Post Office Box 6327 Tallahassee, Florida 32314

Re: Resignation of Resident Agent of Environmental Water

Works of the Emerald Coast, Inc.

Resignation of Resident Agent of Emerald Coast Water

Authority, LLC

Dear Sir or Madam:

Enclosed for filing for the two referenced entities are Cover Letters and Resignations of Registered Agent. Also enclosed is this firm's check in the amount of \$175.00 to cover fees associated with the resignation of Ms. Barry as Resident Agent for these two entities.

Thank you for your assistance and should there be any questions, please do not hesitate to contact the undersigned at the number listed above.

Sincerely,

BROAD AND CASSEL

Vicki L. Causseaux

Paralegal

:vlc

Enclosures