## L0500061 267

(Requestor's Name)		
(Address)		
(Address)		
y/State/Zip/Phone	e #)	
WAIT	MAIL	
(Business Entity Name)		
(Document Number)		
_ Certificates	of Status	
Special Instructions to Filing Officer:		
	dress)  dress)  y/State/Zip/Phone  WAIT  siness Entity Nan  cument Number)  Certificates	

Office Use Only



700132920017

07/16/08--01030--016 \*\*55.00

RECEIVED

08 JUL 16 PH 12: 06

B. KOHR

JUL 1 7 2008

**EXAMINER** 

08 JUL 16 PH 3: 15

SHERRI BEEMAN SMITH THOMPSON	
Requester's Name SHAW & MANAUSA	
3520 THOMASVILLE ROAD, 4TH FLOOR Address	
Addiess	·
TALLAHASSEE, FLORIDA 32344	•
City/State/Zip Phone # 893-4105	
	**************************************
	Office Use Only
CORPORATION NAME(S) & DOCUMENT NUMBER(S)	, (if known):
	0
men Anstal Dandies	E E
(Corporation Name) (Document #	
(Corporation Paints)	FILED 3: 15
	25 CF
2. (Corporation Name) (Document #	بن
(Corporation Finance)	6. 5
	The state of the s
3. (Corporation Name) (Document #)	7
(Corporation Name) (Document #,	•
·	
4.	
(Corporation Name) (Document #	)
Walk in Pick up time	Certified Copy
Mail out Will wait Photocopy	Certificate of Status
NEW FILINGS AMENDMENTS	·
Profit Amendment	
	of R.A., Officer/Director
	gistered Agent
Domestication Dissolution/W	Vithdrawal
Other Merger	
OTHER BILDIOS PROJETO ATION	ALOUAT TEXA TION
OTHER FILINGS REGISTRATION	N/QUALIFICATION
☐ Annual Report ☐ Foreign	
Fictitious Name Limited Partn	ershin
Reinstatemen	
Trademark	•
Other	
- Other	
	-
CR2E031(7/97)	Examiner's Initials
0.000001(/)	



## 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: MBC COASTAL PROPE	Pears on the records of the Florida Department RTIES, LLC
2. This limited liability company was organized under FLORIDA	er the laws of:
3. The Florida document/registration number of this L05000061267	limited liability company is:
4. I, ROBERT J. MOFFATT  (Print Name of Person Resigning)	hereby resign as a MEMBER (Print Title)
of this limited liability company and affirm the limitesignation in writing.	ited liability company has been notified of my
Rold (Klos).	
Signature of Resigning Member, Managing Memb	er or Manager

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

Filing Fee: Certified Copy: