105000014574

| (Re | equestor's Name) | | | |
|---|--------------------|-------------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (Ci | ty/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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SECRETARY OF STATE

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EXAMINER

COVER LETTER

| TO: | Registration Section | | | | |
|---------------|---|---------------|----------------------------|---------|--------|
| | Division of Corporations | | | | |
| SUBJ | | | | | |
| | (Name of Limited | Liability Con | npany) | | |
| The enfiling. | nclosed member, managing member or man | nager resig | nation and fee(s) are subm | itted f | For |
| Please | return all correspondence concerning this | matter to: | | | |
| Phili | ip A. Pugh, Esq | | _ | | |
| | (Contact Person) | • | | | |
| Litva | k Beasley & Wilson, LLP | | _ | | |
| | (Firm/Company) | | | | |
| 226 | E. Government St. | | _ | | |
| | (Address) | | • | | En.J |
| Pens | sacola, FL 32502 | | | | |
| | (City/State and Zip Code) | | _ | る日 | 2 3 |
| For fu | rther information concerning this matter, p | lease call: | | 3EE, F | 20mm |
| Phill | ip A. Pugh | 850 | , 432-9818 | STA | |
| | (Name of Contact Person) | Area Code | & Daytime Telephone Numb | er) | (C) |
| Enclos | sed please find a check made payable to th | | | | |
| | ✓ \$25 Filing Fee | <u> </u> | 55 Filing Fee & | | |
| | | | Certified Copy | • | |
| | CET/COURIER ADDRESS: | | MAILING ADDRESS: | | |
| _ | tration Section | | Registration Section | | |
| | on of Corporations | | Division of Corporations | | |
| | n Building | | P.O. Box 6327 | | |
| 2661 I | Executive Center Circle | | Tallahassee, Florida 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 a of State is: Mahogany Mills, L.L.C. | ppears on the records of the Florida Department |
|--|---|
| 2. This limited liability company was organized und Florida | der the laws of: |
| 3. The Florida document/registration number of this L05000074576 | |
| _{4. I.} Robert B. Randel | , hereby resign as a Member 2 |
| (Print Name of Person Resigning) | (Print Title) |
| of this limited liability company and affirm the line resignation in writing. | nited liability company has been notified of my |
| Signature of Resigning Member, Managing Mem | ber or Manager |

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)

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