

L05000082306

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

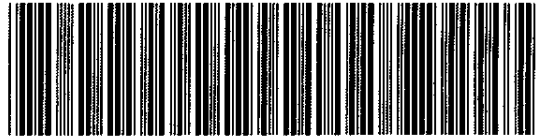
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TALLAHASSEE, FLORIDA

RA Resign
Tenn
3/20/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TREASURE ISLAND CITYHOMES LLC
(Name of Limited Liability Company)

DOCUMENT NUMBER: L05000082306

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

EMIL G. PRATESI
(Name of Person)

RICHARDS, GILKEY, FITE, SLAUGHTER, PRATESI & WARD PA
(Name of Firm/Company)

1253 PARK ST
(Address)

CLEARWATER FL 33756
(City/State and Zip Code)

For further information concerning this matter, please call:

MARY KARN at (727) 443-3281
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

LAW OFFICES
RICHARDS, GILKEY, FITE, SLAUGHTER, PRATESI & WARD, P.A.

RICHARDS BUILDING
1253 PARK STREET
CLEARWATER, FLORIDA 33756

RALPH RICHARDS (1893-1980)
JOHN D. FITE (1933-2000)
JOHN E. SLAUGHTER, JR.
EMIL G. PRATESI
R. CARLTON WARD
THEO J. KARAPHILLIS

TEL: (727) 443-3281
FAX: (727) 446-3741

OF COUNSEL
WILLIAM W. GILKEY
PATRICK W. RINARD
ROBERT C. BURKE, JR.

March 13, 2008

Division of Corporations
P O Box 6327
Tallahassee FL 32314
Attn: Amendment Section

Re: Treasure Island Cityhomes LLC


Dear Sir or Madam:

With regard to the above referenced company, enclosed herewith please find the following:

1. Cover Letter and Resignation of Registered Agent for a Limited Liability Company,
2. Our check in the amount of \$85.00 to cover the filing cost.

Once the document has been properly filed, please return same to me at the address listed above.

Should you have any questions, please feel free to contact me.

Very truly yours,

Emil G. Pratesi

EGP/mk
Enclosure

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

JASON MIZE

(Name of Registered Agent)

Registered Agent for TREASURE ISLAND CITYHOMES LLC

(Name of Limited Liability Company)

L05000082306

(Document Number, if known)

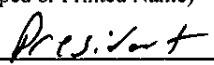
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TALLAHASSEE, FLORIDA

- A copy of this resignation was mailed to the above listed limited liability company at its last known address.
- The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.


(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)


(Capacity)

FILING FEES:

\$ 85.00	Active limited liability company
\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

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