

105000098406

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

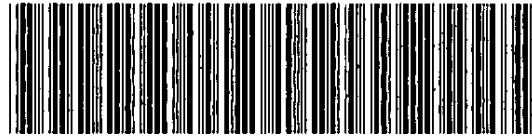
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

M. THOMAS

JUL 16 2008

EXAMINER

FROM :

FAX NO. : 9048148571

Jul. 02 2008 06:00PM P3

### COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Seaside Enterprises, LLC  
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Rosa Travis  
(Contact Person)

\_\_\_\_\_  
(Firm/Company)

8003 SW 5<sup>th</sup> Ave  
(Address)

Gainesville FL 32607  
(City/State and Zip Code)

For further information concerning this matter, please call:

Rosa Travis at (352) 372-3930  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &  
Certified Copy

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

CRZE079 (5/06)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA



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 appears on the records of the Florida Department of State is: Seaside Enterprises, LLC

2. This limited liability company was organized under the laws of:  
Florida, October 2005

3. The Florida document/registration number of this limited liability company is:  
L05000098406

4. I, Rosa Travis, hereby resign as a Managing Manager  
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

A handwritten signature in cursive script that reads "Rosa Travis".

Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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