

LOS000109972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NRC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IP MANAGEMENT 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:

JENNIFER BAKER

(Contact Person)

JENEMI ASSOCIATES INC

(Firm/Company)

6996 PIAZZA GRANDE AVE #202

(Address)

ORLANDO FL 32835

(City/State and Zip Code)

For further information concerning this matter, please call:

JENNIFER BAKER

(Name of Contact Person)

at (321) 293-0650

(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



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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: IP MANAGEMENT LLC

2. This limited liability company was organized under the laws of:
FLORIDA

3. The Florida document/registration number of this limited liability company is:
L05000109972

4. I, LINDA SHERIDAN, hereby resign as a 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.

[Signature]

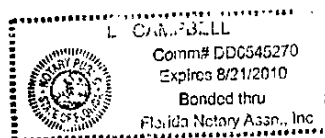
Signature of Resigning Member, Managing Member or Manager

NOTARIAL CERTIFICATES

STATE OF FLORIDA
COUNTY OF ORANGE
Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

The foregoing instrument was acknowledged before me this
8-3-07 by Linda Sheridan
personally known to me or who has produced FL
Driver license as identification and who did
so on oath.

CR2E079 (5/06)



[Signature]
Notary Public