# 

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified CopiesCertificates of Status
Special Instructions to Filing Officer:
9-27
Office Use Only



09/27/06--01001--019 \*\*75.00



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 8, 2006

WALTER LOEWE 1931 TAMIAMI TRAIL #4 PORT CHARLOTTE, FL 33948

SUBJECT: SUNBELT MANAGEMENT SERVICES, LLC

Ref. Number: L06000003905

We have received your document for SUNBELT MANAGEMENT SERVICES, LLC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 706A00054449

# COVER LETTER

•	TO: Registration Section Division of Corporations
	SUBJECT: SUN BELT MANAGEMENT SERVICES, LLC (Name of Limited Liability Company)
	The enclosed Articles of Amendment and fee(s) are submitted for filing.
	Please return all correspondence concerning this matter to the following:
	WALTER LOEWE (Name of Person)
	SUN BELT MANAGENTENT (Firm/Company)
	1931 TAMIAMI TRAIL #4
	PORT CHARLOTTE FL. 33948 (City/State and Zip Code)
	For further information concerning this matter, please call:
	WAGER LOEWE at (941) 764-7777  (Name of Person) (Area Code & Daytime Telephone Number)
	(
	Enclosed is a check for the following amount:
>	Enclosed is a check for the following amount:  \$25.00 Filing Fee \$\sum_{\text{Certificate of Status}} \sum_{\text{Certified Copy}} \

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

#### STREET/COURIER ADDRESS:

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



# FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

# RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Barbara M Watt Bigs, hereby resign as Member (Title)	
of Sunbelt Management Services, CLC, (Limited Liability Company)	
a limited liability company organized under the laws of the State of Horida	
and affirm that the limited liability company has been notified in writing of the resignation.	
Signature of resigning manager, managing member of member)  STATE SEP 27  AN 9: 45	FILED

### FILING FEE IS \$25.00

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

CR2E079 (8/05)