## LOGOCOCOTISH

(Requestor's Name)				
•				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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SECRETARY OF STATE OF VISION OF CORPORATIONS

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## **COVER LETTER**

**TO:** Registration Section Division of Corporations

Tallahassee, Florida 32301

CR2E079 (5/06)

SUBJECT: VAN DEW FUE WHP, UL				
(Name of Limited Liability Company)				
The enclosed member, managing member or manager refiling.	signation and fee(s) are submitted for			
Please return all correspondence concerning this matter t	0:			
MUTATEL GOTTLIES NAN NORM (Contact Person)	_ <del></del>			
VANDEMERE MHP LLC (Firm/Company)	_ <del></del>			
16501 VIA VENETIA EAST (Address)				
DELRAY BEACH FL 37484  (City/State and Zip Code)				
For further information concerning this matter, please call:				
(Name of Contact Person) at (S61)  (Area Co	1827-3333			
(Name of Contact Person) (Area Co	de & Daytime Telephone Number)			
Enclosed please find a check made payable to the Florida	Department of State for: \$55 Filing Fee & Certified Copy			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle	Tallahassee, Florida 32314			





## 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 lin of State is:	nited liability company as it	appears on the records	of the Florida Department	
2. This limited liability fluida	y company was organized un	nder the laws of:		
3. The Florida document/registration number of this limited liability company is:  LOGODOON 184				
4. I, STRYEN W (Print Nam	. Sta	, hereby resign as a _	MANAGEM	
(Print Nam	e 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 of Resigning Member, Managing Member or Manager				
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			