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SEURETARY OF STATE

12 JUL 24 PM 3:5

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Go For It Adventures, LLC.	
(Name of Limited Liab	ility Company)
The enclosed member, managing member or managiling.	er resignation and fee(s) are submitted for
Please return all correspondence concerning this ma	tter to:
Tonya Jean Sambile	
(Contact Person)	
Go For It Adventures, LLC.	
(Firm/Company)	
97671 Overseas Highway	•
(Address)	
TO SERVICE OF COMMENT	the fit will be writing the life
Key Largo, FL 33037	
(City/State and Zip Code)	
For further information concerning this matter, plea	se call:
Tonya Jean Sambile at (305 ₎ 923-9941
(Name of Contact Person) (Are	ea Code & Daytime Telephone Number)
Enclosed please find a check made payable to the F \$25 Filing Fee	lorida 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
Tallahassee, Florida 32301	
CR2E079 (5/06)	·•



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability comp		pears on the re	cords of the Flo	orida Departm	ent ·
2. This limited liab Florida	ility company was org	anized und	er the laws of:			
3. The Florida docu L06000010	ument/registration nun 1648	nber of this	limited liabilit	y company is:		
	seph Murphy ame of Person Resigning)	/	, hereby resign	as a Manag	ging Memb	er_
of this limited lial resignation in wr	pility company and aff	firm the lim		_	en notified of	my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				EE, F	19 JUL 24 PM 3

CR2E079 (5/06)