

L060000/4492

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

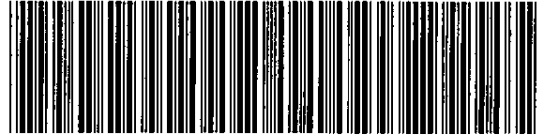
Special Instructions to Filing Officer:

A. LUNT

FEB - 2 2009

EXAMINER

Office Use Only



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STATE TARIFF OF STATE  
TALLAHASSEE, FLORIDA

2009 JAN 30 PM 4:37

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Lost Another Bucket 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:

May ha James  
(Contact Person)

Lost Another Bucket LLC  
(Firm/Company)

40 SW 12<sup>th</sup> Street Ste 100A  
(Address)

Ocala, FL 34471  
(City/State and Zip Code)

For further information concerning this matter, please call:

May ha James at (352) 690-6116  
(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

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TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE



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: Lost Another Bucket LLC

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

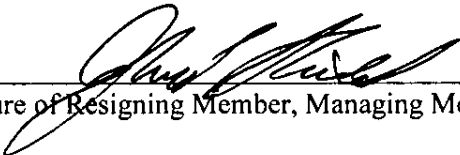
Florida

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

606000014492

4. I, John P. Shields, hereby resign as a managing member  
(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 of Resigning Member, Managing Member or Manager

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

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DIVISION 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: Just Another Bucket 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:

L06000014492

4. I, Dawn Shields, hereby resign as a member  
(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.

✓ Dawn Shields  
Signature of Resigning Member, Managing Member or Manager

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

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

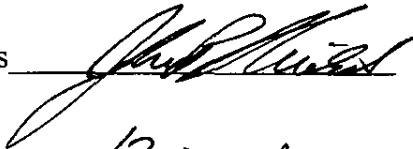
Ron and Mary Lou James  
40 SW 12<sup>th</sup> Street  
Ste 102A  
Ocala, FL 34471

Re: Resignation as Managing Member and Member  
Just Another Bucket LLC

Dear Ron and Lou:

For the sum of \$1.00, I, John Shields, Managing Member of Just Another Bucket LLC,  
do hereby resign from said corporation effective immediately.

John P Shields



Date

12-31-08

For the sum of \$1.00, I Dawn Shields, Member of Just Another Bucket, LLC, do hereby  
resign from said corporation effective immediately.

Dawn Shields



Date

12-31-08

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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