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(Re	equestor's Name)	
(Ac	Idress)	· .
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(Cit	ty/State/Zip/Phone	e #)
. PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	
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SECRETARY OF STATE FALLAHASSEE, FLORIDA

COVER LETTER

Division of Corporations	
SUBJECT: Flagstone Development Group, LL (Name of Limited Liability)	
Dear Sir or Madam:	
The enclosed Resignation of Member, Managing Member	or Manager and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Franklin R. Harrison	<u> </u>
(Name of Person)	
Harrison, Sale, McCloy, Thompson & Dunc	can Agg 06
(Firm/Company)	
304 Magnolia Avenue	AUG 28 AM IO: ECRETIATY OF STALLAHASSEE, FLORI
(Address)	
Panama City, Florida 32401	AM IO: 32 OF STATE E. FLORIDA
(City/State and Zip Code)	DA 32
For further information concerning this matter, please call:	
Stephanie Slack at (85	0 769-3434
(Name of Person) (Area	Code & Daytime Telephone Number)
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
Enclosed is a check for the following amount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Russell T. Arline	, hereby resign as Managing Member (Title)
of Flagstone Development Group, LLC	
(Limited Liabil	lity Company)
a limited liability company organized under the la	ws of the State of Florida,
and affirm that the limited liability company has b	een notified in writing of the resignation.
(Signature of resigning manager,	O6 AUG 28 AM IO: 3 SECRETARY OF STATE ALLAHASSEE, FLORID

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