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Certified Copies Certificates of Status					
Special Instructions to	Filing Officer:				
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Office Use Only



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2010 APR 30 PM R: 41
SECRETARY OF STATE
ANASSEE, FLORIDA

C. LEWIS

MAY 3 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corpo		ન્ ર ા હે ન્યું				
SUBJECT:	Bhavsar, Giff	ord & Hagood, LLC				
	Name of Limi	ted Liability Company				
	mendment and fee(s) are sub	-				
Please return all correspond	ence concerning this matter	to the following:				
		Peter P. Hagood				
		Name of Person				
•	Bhavsar, Gifford & Hagood, LLC					
		Firm/Company				
	1053 Maitland Center Commons, Suite 101					
		Address				
	Maitland, Florida 32751					
		City/State and Zip Code	•			
	phagood@bghlawfirm.com E-mail address: (to be used for future annual report notification)					
For further information cond	cerning this matter, please ca	all:				
Peter	P. Hagood	at (_407_)	425-1202			
Name of Pe		Area Code & Daytime Telephone Number				
Employed in a short for the	Salla at a sala					
Enclosed is a check for the f	-					
\$25.00 Filing Fee	330.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

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



FILED

2010 APR 30 PM @ 41

SECRETARY OF STATE FALL AHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as		of the Florida Department
of State is: Bha	avsar, Gifford & Hago	ood, LLC	·
2. This limited liab Florida	ility company was organized	l under the laws of:	
3. The Florida docu L06000021	iment/registration number of	this limited liability con	npany is:
_{4. I,} Kashmira	Bhavsar	, hereby resign as a	Managing Member
(Print N	ame of Person Resigning)		(Print Title)
resignation in wf	pility company and affirm the ting. gring Member, Managing M		ny has been notified of my
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		