•	
	0000032883
	0000000
	ω

(Re	equestor's Name)			
(Ac	ldress)	····		
(Ac	ldress)			
(Ci	ty/State/Zip/Phone	#)		
PICK-UP		MAIL		
(Bu	isiness Entity Nam	le)		
(Do	ocument Number)			
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
	Office Use Only	,		



05/08/06--01060--007 **25.00

DINTERNAL -8 PH I2: 13



COVER LETTER

TO: **Registration Section Division of Corporations**

SUBJECT: THIRD PHASE, LLC

(Name of Limited Liability Company)

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:

ADAM NICKIOS (Name of Person) (Firm/Company) 59 MENTOR DRIVE (Address) NAPIES FINCIDA 34110 (City/State and Zip Code)

2006 MAY -8 PM 12:

For further information concerning this matter, please call:

ADAM NICKIOS (Name of Person) at (239) 597 - 7342 (Area Code & Daytime Telephone Number)

. •

STREET/COURIER ADDRESS:

Registration Section

Clifton Building

Division of Corporations

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

CR2E079 (8/05)

□\$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

	ING		
I, MATTHEW E. MOORE	, hereby resign as MANAG	MENBER	
	(Title)		

of THIRD PHASE, LLC

(Limited Liability Company)

a limited liability company organized under the laws of the State of FLORIDA

and affirm that the limited liability company has been notified in writing of the resignation.

(Signature of resigning manager, managing member or member)



ŧ

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