# L060000 46165

(Red	questor's Name)	
· (Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Document Number)		
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		
·		





700286938057

86/17/16--01026--009 \*\*50.00

SECRETARY OF STATE FALLAHASSEE, FLORIDA

i c

K. SALY EXAMINER JUN 20

#### Lessie C. Crosson

3826 Sugar Lane, Sarasota, Florida 34235

To:

Resources, LLC 935 North Beneva Road Suite 609-31 Sarasota, Florida 34232

Florida Document/ Registration Number: L06000046165

Attention: All Members

#### Resignation as a Member of Resources, LLC

Dear Board Members:

As of the above date, please accept this letter as my formal resignation from the Board of Members of Resources, LLC.

I am grateful for having had the opportunity to serve on the board. Now is time to move on and focus on my art career.

Please update the list of Members on the Resources, LLC's Florida Limited Liability Company Annual Report as soon as possible.

Wishing all of you and the business only the best for the future.

Respectfully,

Lessie C. Crosson, Member

### **COVER LETTER**

TO: Registration Section

CR2E079 (2/14)

Divis	ion of Corporations			
SUBJECT:	RESOURCES, LLC			
00000011	(Name of Limited Liability Company)			
The enclosed	member, resignation or dis	sociation and fee(	s) are submitted for filing.	
Please return	all correspondence concern	ing this matter to:		
LESSIE C.	CROSSON		•	
	(Contact Person)		_	
	(Firm/Company)			
3826 SUGA			_	
	(Address)			
SARASOTA	A, FLORIDA 34235			
	(City/State and Zip Code)		<del></del>	
For further ir	nformation concerning this n	natter, please call:		
LESSIE C.	CROSSON	941 at (	735-8017	
(N	ame of Contact Person)	(Area Code	e & Daytime Telephone Number)	
Enclosed plear \$25 Filing	ase find a check made payat Fee		Department of State for: g Fee & Certified Copy	
Registration			MAILING ADDRESS: Registration Section	
Division of C Clifton Build	•		Division of Corporations P.O. Box 6327	
	ve Center Circle		Tallahassee, Florida 32314	
Tallahassee,	Florida 32301		•	





## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department
of State is: RESOURCES, LLC
2. The Florida document/registration number assigned to this limited liability company is:
L06000046165
3. The date this member/manager withdrew/resigned or will withdraw/resign is:
4. I, LESSIE C. CROSSON , hereby withdraw/resign as a (Print Name of Person Resigning)
(Print Name of Person Resigning)
MEMBER
(Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
Lesse C. Crasson
Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)