L0000054992

(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:

L. SELLERS

SEP 2 3 2009

EXAMINER

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SECRETARY OF STATE
TAIL AHASSEF FLORIDA

COVER LETTER

	stration Section sion of Corporations				
SUBJECT:	O&F Investments LLC				
	(Name of Limit	ed Liability Co	mpany)		
The enclosed filing.	d member, managing member or n	nanager resig	gnation and fee(s) are submitted for		
Please return	all correspondence concerning the	nis matter to:			
Otis W. F	avre				
	(Contact Person)		_		
· · ·	(Firm/Company)		_		
330 How	ze Beach Rd.	<u>-</u>	_		
	(Address)				
Slidell, LA	A 70461		_		
	(City/State and Zip Code)		-		
For further in	nformation concerning this matter	, please call:			
Otis Favr	e	_{at (} 985	, 639-7529		
(N	ame of Contact Person)	(Area Code	& Daytime Telephone Number)		
Enclosed ale	ase find a check made payable to	the Floride I	Janartment of State for		
Lifetosca pic	\$25 Filing Fee		555 Filing Fee &		
		(V .)	Certified Copy		
	OURIER ADDRESS:		MAILING ADDRESS:		
Registration			Registration Section		
Division of C			Division of Corporations		
Clifton Build	•		P.O. Box 6327		
	ive Center Circle		Tallahassee, Florida 32314		
i alianassee,	Florida 32301				

CR2E079 (5/06)



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 F Investments LLC	it appears on the records	of the Florida Department
2. This limited liab	vility company was organized	d under the laws of:	
3. The Florida doc <u>L0600005</u>	ument/registration number of 4992	f this limited liability con	npany is:
4. I, Ford Favr	9	, hereby resign as a	Managing Member
(Print N	lame of Person Resigning)		(Print Title)
resignation in wr	bility company and affirm the iting.		ny has been notified of my
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		

CR2E079 (5/06)

FILED

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SECRETARY OF STATE
TALL AHASSEE FLORIDA