LD4000054387

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
(Sity/State/Elp/1 ijone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Certificates of Status					
Special Instructions to Filing Officer:					
·					

Office Use Only



000114119230

01/10/08--01033--017 **25.00

2008 JAN 10 AM 10: 58
SECRETARY OF STATE
AND AHASSEE, FLORID

T. CLINE

JAN 1 1 2008

EXAMINER

COVER LETTER

CR2E079 (5/06)

TO: Registration Section Division of Corporations		
SUBJECT: STEIN AND VINE, LLC (Name of Limited Liability Com	nnany)	
(Name of Ellinica Elability Con	ipany)	
The enclosed member, managing member or manager resigniling.	nation and fee(s) are submitted for	
Please return all correspondence concerning this matter to:		
KATHLEEN BERG		
(Contact Person)	-	
STEIN AND VINE, LLC	_	
(Firm/Company)	F	
1610 LAKE GEORGE ROAD	SECF ALL	err mind
. (Address)	AN I	133000000
SEVILLE FL 32190	O A	
(City/State and Zip Code)	FS	£
For further information concerning this matter, please call:	2008 JAN 10 AN 10: 58 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
MAUREEN VAN DALEN at (407	<u>)</u> 462-3325	
(Name of Contact Person) (Area Code	& Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida D \$25 Filing Fee \$\$\$	Department of State for: 55 Filing Fee & Certified Copy	
Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	ited liability company as it ap	pears on the records	of the Flo	orida De	partmer	nt
2. This limited liability FLORIDA	company was organized und	er the laws of:		SECF	2008 J	
L0600005938				HASSEE, FL	JAN 10 AMI	
4. I, MAUREEN V	'AN DALEN of Person Resigning)	, hereby resign as a	MANA(GING	MEM	BER
·	y company and affirm the lim	ited liability compan	•	سند	d of my	у
Signature of Resignin	ng Member, Managing Memb	er or Manager				
-	\$25.00 (Required) \$30.00 (Optional)					