

L06000065879

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

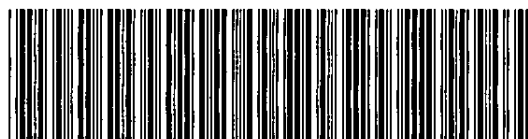
(Business Entity Name)

(Document Number)

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09 MAR 16 AM 10:16
DEPT. OF CORPORATIONS
DIVISION OF FLORIDA
TALLAHASSEE, FLORIDA

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09 MAR 16 PM 1:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR
MAR 16 2009
EXAMINER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

233 W. Duval Street, LLC

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CLERK OF STATE
TALLAHASSEE, FLORIDA

Thank you!
☺

Signature

Requested by: Christina
Name Date 3/16 Time AM

Walk-In Will Pick Up

Art of Inc. File
LTD Partnership File
Foreign Corp. File
✓ L.C. File member Resignation
Fictitious Name File
Trade/Service Mark
Merger File
Art. of Amend. File
RA Resignation
Dissolution / Withdrawal
Annual Report / Reinstatement
Cert. Copy
✓ Photo Copy
Certificate of Good Standing
Certificate of Status
Certificate of Fictitious Name
Corp Record Search
Officer Search
Fictitious Search
Fictitious Owner Search
Vehicle Search
Driving Record
UCC 1 or 3 File
UCC 11 Search
UCC 11 Retrieval

Courier



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: 233 W. Duval Street, LLC

2. This limited liability company was organized under the laws of:
Florida

3. The Florida document/registration number of this limited liability company is:
L06000065879

4. I, Eric Campbell, hereby resign as a Managing Member
(Print Name of Person Resigning) (Print Title)

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



Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)