LD600073185

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT	MAIL			
(Business Entity Name)	: 4			
(Document Number)	11			
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06/08/07--01026--011 **55.00

SECRETARY OF STATE.

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Seahorse Home. (Name of Limited L	Builders LLC (iability Company)
The enclosed member, managing member or man filing.	ager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
Suzy Spence (Contact Person)	·
(Firm/Company)	,
3640 Scenic Hwy 9	18
Destin Fhorida 32 (City/State and Zip Code)	541
For further information concerning this matter, pl	lease call:
Suzy Spence at ((Name of Contact Person)	850 240-7787 Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the of State is:	limited liability company as Seahorse. Home	it appears on the records of Builders LLC	the Florida Department
• .	lity company was organized		
_	ment/registration number of	f this limited liability compa	ny is:
•		, hereby resign as a e limited liability company l	
resignation in wri			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		2007 JUN -8 SECRETAR) TALLAHASSI

CR2E079 (5/06)