# 10000073862

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(City/	State/Zip/Phon	ne #)
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DIVISION OF CORPONATIONS

#### **COVER LETTER**

Division of Corporations
SUBJECT: Panhandle Retreats, LC (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Jeff toley (Contact Person)
Panhandle Retreats, LLC (Firm/Company)
9552 Brentwood Blud. (Address)
Mayarre FL 32566 (City/State and Zip Code)
For further information concerning this matter, please call:
Jeff tolev at 850, 496-550  (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 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

$\sim$	limited liability company as anhandle Retr	t appears on the records of the Florida Department
	lity company was organized the of Florida	
	ment/registration number of	his limited liability company is:
4. I, Oxa K	FoleV nme of PersonlResigning)	, hereby resign as a(Print File)
of this limited liab resignation in write		limited liability company has been notified of my
Jano X	Lolay	
Signature of Resig	gning Member Managing M	ember or Manager
Filing Fee:	\$25.00 (Required)	07

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CR2E079 (5/06)

Certified Copy:

\$30.00 (Optional)