

LD6000075041

(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:

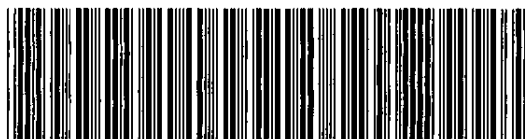
L. SELLERS

JAN 19 2010

EXAMINER

5

Office Use Only



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01/15/10--01008--021 **247.50

FILED
10 JAN 15 PM 2:17
SECRETARY OF STATE
TALLAHASSEE FLORIDA

CFRA, LLC
REGISTERED AGENT SERVICES
A SUBSIDIARY OF CARLTON FIELDS

Corporate Center Three at International Plaza
4221 W. Boy Scout Blvd, 10th Floor
Tampa, Florida 33607-5736

Mailing Address:
P. O. Box 3239
Tampa, Florida 33601-3239
Tel (813) 223-7000 Fax (813) 229-4133

January 8, 2010

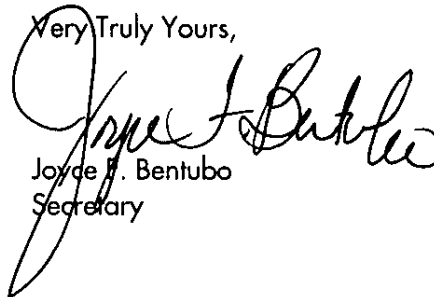
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Re: RESIGNATION OF REGISTERED AGENT –
SAIL HARBOR MARINA, LLC
TAO SAWGRASS CONDOMINIUM ASSOCIATION, INC.
CARCAS ENTERPRISES, LLC
PYC MANAGEMENT LLC
BLUE ORANGE PROPERTIES, LLC

Gentlemen:

Please find enclosed Resignation of Registered Agent forms for the above referenced entities. Also enclosed is Carlton Fields' Check No. 42302 in the amount of \$247.50 for the filing fees for these entities.

Very Truly Yours,



Joyce F. Bentubo
Secretary

JFB/kl
Enclosures

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

CFRA, LLC

(Name of Registered Agent)

Registered Agent for Sail Harbor Marina, LLC

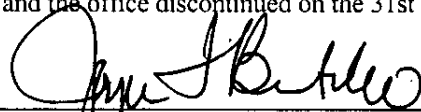
(Name of Limited Liability Company)

L06000075041

(Document Number, if known)

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



(Signature of Resigning Agent)

If signing on behalf of an entity

Joyce F. Bentubo

(Typed or Printed Name)

Secretary

(Capacity)

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 JAN 15 PM 2:17

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