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T. HAMPTON

MAY 9 3 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: <u>Lagnolia Woods Resort Management</u> , We (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:
Agela Perkins (Contact Person)
(Firm/Company)
7011 Grand National Dr. Seute 104
Orlando, F1 32819 (City/State and Zip Code)
For further information concerning this matter, please call:
Angua Perkins at (407) P2-0430 542/2 (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 Clifton Building Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 Tallahassee, Florida 32301

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:		t appears on the records of the Florida Dep SOIT Management, LLC	oartmen	t
2. This limited liabi	lity company was organized i	under the laws of:		
3. The Florida docu		this limited liability company is:		
•	GOTON ame of Person Resigning)	, hereby resign as a <u>Haraging</u> L		ber
of this limited liab resignation in wri		limited liability company has been notifie	a ot my	,
Signature of Resig	gning Member, Managing Me	mber or Manager		010
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		11 HAY 20	SECRETAR