## L060000 81709

(Re	questor's Name)	<u> </u>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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## **COVER LETTER**

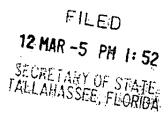
for

TO: Registration Section Division of Corporations	
SUBJECT: Beach Rente	oils at Navarre LLC mited Liability Company)
The enclosed member, managing member of filing.	r manager resignation and fee(s) are submitted
Please return all correspondence concerning	g this matter to:
Tolie Massey (Contact Person)	N
Beach Rentals at	- Navara 22C
8438 GUIF BIND (Address)	sk B-2
Navarre, FL 32 (City/State and Zip Code)	566
For further information concerning this matt	ter, please call:
Jolie Massey (Name of Contact Person)	at (850) 525-0504 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable ( \$25 Filing Fee	to the Florida Department of State for:  \$55 Filing Fee &  Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301





## 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 a	as it appears on the records	of the Florida Department
2. This limited liab	ility company was organize	ed under the laws of:	
		of this limited liability com	
4. I, <u>Golly Fn</u> (Print N	Herprises LLC ame of Person Resigning)	C COOK , hereby resign as a _	MGRM (Print Title)
of this limited lial resignation in wri		the limited liability compan	y has been notified of my
Golly Enfer	gning Member, Managing	Juy (ook) Member or Manager	
	\$25.00 (Required) \$30.00 (Optional)		