

L060000098363

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

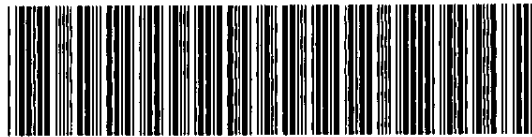
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300187610793

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2010 DEC 28 PM 1:43
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

B. KOHR
DEC 28 2010
EXAMINER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 DEC 28 PM 2:45



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 625560 4304312

AUTHORIZATION :

COST LIMIT : \$ 25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 DEC 28 PM 2:45

ORDER DATE : December 28, 2010

ORDER TIME : 11:02 AM

ORDER NO. : 625560-015

CUSTOMER NO: 4304312

DOMESTIC AMENDMENT FILING

NAME: JLW KEY WEST 1, LLC

File 1ST

EFFECTIVE DATE:

XX___ RESIGNATION FORM

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___ CERTIFIED COPY
XX___ PLAIN STAMPED COPY
___ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Matthew Young -- EXT# 2962

EXAMINER'S INITIALS: _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 DEC 28 PM 2:45

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER


I, SH7, INC., hereby resign as MANAGING MEMBER
(Title)

of JLW KEY WEST 1, LLC,
(Limited Liability Company)

a limited liability company organized under the laws of the State of FLORIDA,

and affirm that the limited liability company has been notified in writing of the resignation.

SH7, INC.

BY:  ROBERT A. SPOTTSWOOD, PRESIDENT
(Signature of resigning manager, managing member or member)

FILING FEE IS \$25.00

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