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K. SALY EXAMINER JAN 10 2013

### **COVER LETTER**

Registration Section TO: Division of Corporations

# SUBJECT: KARLA SEAWALL INVESTMENTS, LLC (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 th	is matter to:	
JAMES E. WILLIS, ESQ		
(Contact Person)		
(Firm/Company)		
975 6TH AVE S #200		
(Address)	<u>,, </u>	
NAPLES FL 34102		
(City/State and Zip Code)		
For further information concerning this matter,	please call:	
JIM WILLIS	239	435-0094
(Name of Contact Person)		& Daytime Telephone Number)
Enclosed please find a check made payable to t	he Florida De	epartment of State for:
■ \$25 Filing Fee	<b>□</b> \$:	55 Filing Fee &
		Certified Copy
STREET/COURIER ADDRESS:		MAILING ADDRESS:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
Clifton Building		P.O. Box 6327
2661 Executive Center Circle		Tallahassee, Florida 32314

Tallahassee, Florida 32301

CR2E079 (5/06)



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SLUNLIANY OF STATE TALLAHASSEE, FLORIDA

## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

# RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	e limited liability company as ARLA SEAWALL INVES	it appears on the records of the Florida Department
2. This limited lia FLORIDA	bility company was organized	under the laws of:
3. The Florida doc L06000108	<del>-</del>	this limited liability company is:
4. I, KARLA CO	ONLEY	, hereby resign as a MANAGER
(Print	Name of Person Resigning)	(Print Title)
resignation in w  X Signature of Res		e limited liability company has been notified of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	