106000108703

. (Re	equestor's Name)	
· (Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL MAIL
(Ви	isiness Entity Name	е)
(Do	ocument Number)	,
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		1 -
		1109
	Office Use Only	() ()



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FILED 07 JAN -9 AM 10: 34

COVER LETTER

TO: Registration Section Division of Corporations			
Division of Corporations			
North Florida Davalanceat I	1.0		
SUBJECT: North Florida Development L			
(Name of Limited Liability Con	npany)		
The enclosed member, managing member or manager resigning.	nation and fee(s) are submitted for		
Please return all correspondence concerning this matter to:			
George Jackmore			
(Contact Person)	_		
North Florida Development LLC	_		
(Firm/Company)	7A.S.		
9920 Beach Blvd	JAN -9 AH IO: 31		
(Address)	9		
Jacksonville, FI 32246	H 10		
(City/State and Zip Code)	RED		
For further information concerning this matter, please call:			
	044 5005		
George Jackmore at 904	614-5995 & Daytime Telephone Number)		
(Name of Contact Person) (Area Code	& Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida D	Department of State for:		
	S55 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		

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 limited liability company as it apports of State is: North Florida Development		artment		
2. This limited liability company was organized under The state of Florida	er the laws of:	SECF	رر 70	
3. The Florida document/registration number of this L06000108703	·	Ti	07 JAN -9 AH	TLED
4. I, William Alson (Print Name of Person Resigning)	heroby resign as a MGRM (Print Title)	OF STATE		
of this limited liability company and affirm the had resignation in writing. Signature of Resigning Member, Managing Member		of my	-	

CR2E079 (5/06)

Filing Fee: Certified Copy: \$25.00 (Required) \$30.00 (Optional)