

LO7000011255

(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:

G. MCLEOD

SEP 11 2009

EXAMINER



300160351123

09/10/09--01020--007 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
09 SEP 10 PM 2:50

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Florida's Finest Investigations, 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 this matter to:

Thomas Worthington

(Contact Person)

Florida's Finest Investigations, LLC

(Firm/Company)

319 Clematis Street Suite 107

(Address)

West Palm Beach, Florida 33401

(City/State and Zip Code)

For further information concerning this matter, please call:

David Bergum

(Name of Contact Person)

at (772) 519-4336

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &

Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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

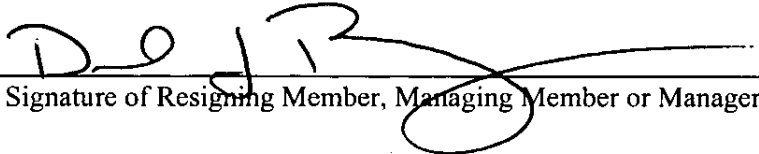
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Florida's Finest Investigations, LLC

2. This limited liability company was organized under the laws of:
Dept of Agriculture/Div. of Licensing

3. The Florida document/registration number of this limited liability company is:
L07000011255

4. I, David Bergum, hereby resign as a MGR/Owner
(Print Name of Person Resigning) *(Print Title)*

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


Signature of Resigning Member, Managing Member or Manager

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

Received

SEP 09 2009
Licensure Services
Unit

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 SEP 10 PM 2:50