## 07000024680

(Re	equestor's Name)			
(Ad	dress)			
. (Ad	dress)			
(Cit	ry/State/Zip/Phone	e #j		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
		-		

Office Use Only



900103995009

06/18/07--01025--001 \*\*25.00

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: (Name of Limited)	Coperties, LLC Liability Company)	
The enclosed member, managing member or ma filing.	nager resignation and fee(s) are submitted for	or
Please return all correspondence concerning this	matter to:	
Jason Baruch (Contact Person)	<del>,,,,,</del>	
The Mcthyre Law Fire	m, toop	
6987 E. Fowler Ave.	TALLAH.	2007 JULI
Temple Terrace, FL 33( (City/State and Zip Code)	<u>الم</u> الم	JUN 18 ANIO: 36
For further information concerning this matter, p	please call:	: 20 21 21 21 21
(Name of Contact Person)	( <u>\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	
Enclosed please find a check made payable to the \$\sqrt{1}\$\$ \$25 Filing Fee	ne Florida Department of State for:  \$55 Filing Fee &  Certified Copy	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

CR2E079 (5/06)

Tallahassee, Florida 32301

2 .0 =



## 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 D	epartment
of State is:	SK Tampa Bay Pro	perties, LLC		·
2. This limited liab	ility company was organized	i under the laws of:		
	01/1/40	<del></del> •	₹ <sub>0</sub>	200
	ument/registration number of 000024680	f this limited liability com	pany is: LAHASSE	81 MNF 1007
4. I, Dustin	D. Deese	, hereby resign as a _	member	IS AHID: 3
•				
of this limited lial resignation in wr	bility company and affirm th	e limited liability compan	y has been notifi	ied of my
Justin	4/1/			
Signature of Resi	gning Member, Managing M	1ember or Manager		
Filing Fee:	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			