

LO10000 25864

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

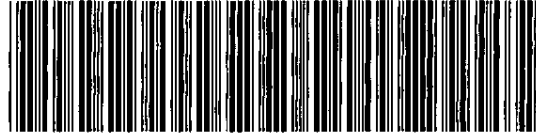
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
08 MAR 21 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DA Thomas MAR 2 4 2008

DA Thomas MAR 2 4 2008

March 19, 2008

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Subject: **Address Change**

To Whom It May Concern:

The mailing address on file for the Old City Wings II LLC, document number L07000025864, is incorrect. Please change the mailing address from PO Box 3152 to the address below.

**525 S.R. 16, Suite 101
St Augustine, FL 32084**

Sincerely,



Daniel J Dougherty

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Old City Wings II LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Daniel Dougherty
(Name of Person)

Old City Wings II LLC
(Firm/Company)

525 S.R. 16 Suite 101
(Address)

St Augustine, FL 32084
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Daniel Dougherty at (904) 825-4540
(Name of Person) (Area Code & Daytime Telephone Number)

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



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: Old City Wings II LLC

2. This limited liability company was organized under the laws of:
Florida

3. The Florida document/registration number of this limited liability company is:
L07000025864

4. I, Melissa A Dougherty, hereby resign as a Title Mg
(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.

Melissa A Dougherty
Signature of Resigning Member/Managing Member or Manager

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

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08 MAR 21 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA