

From: PHOENIX LAW PARTNERS
Division of Corporations

239 461 0083
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03/12/2010 09:03
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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : PHOENIX LAW P.A.
Account Number : I200300000088
Phone : (239) 461-0024
Fax Number : (239) 461-0083

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC REGISTERED AGENT RESIGNATION
CAY CLUBS ACADEMIES LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$30.00

RECEIVED
10 MAR 12 AM 10:05
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TALLAHASSEE, FLORIDA

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MAR 15 2010

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Electronic Filing Menu Corporate Filing Menu

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Cay Clubs Academies LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L07000032590

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Debbie Miller
Name of Person

Phoenix Law PA
Name of Firm/Company

12800 University Drive, Suite 260
Address

Fort Myers, FL 33907
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Debbie Miller at (239) 461-0101
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

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**RESIGNATION OF REGISTERED AGENT FOR A LIMITED
LIABILITY COMPANY**

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

Charles PT Phoenix Esq.

, hereby resigns as

Name of Registered Agent

Registered Agent for

Cay Clubs Academies LLC

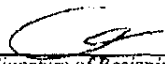
Name of Limited Liability Company

L07000032590

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name_____
Capacity**FILING FEES:**

\$ 85.00	Active limited liability company
\$ 25.00	Administratively dissolved/ voluntarily dissolved withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

INHS17 (08/05)

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