67000333439				
(Requestor's Name)	700188540117			
(City/State/Zip/Phone #)	12/13/1001039018 **50.00			
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	10 DEC 13 PH Stuffe INRY OF ALLAHASSEE, F			
G. MOTTICE Use Only DEC 14 2010 EXAMINER	PH 3: 20 E.FLORIDA			

\_ ...

• • • COVER LETTER				
т <b>о:</b>	Registration S Division of Co			
SUBJI	ECT:	NOF	THCAY, LLC	AABV
•			nited Liability Company	COPY
The en	closed Articles of	f Amendment and fee(s) are su	ibmitted for filing.	
Please	return all corresp	ondence concerning this matte	er to the following:	
		<b></b>	Mark S. Saba	
			Name of Person	
		# #** <u></u> ##* , , , , , , , _	Finn/Company	
			918 Robinhood Street	
			Address	· · · · · ·
			Sarasota, FL 34231	
			City/State and Zip Code	
		E-mail address:	srqsaba@yahoo.com (to be used for future annual report notific:	ation)
For fur	ther information of	concerning this matter, please		
		ark S. Saba	at ( <u>941</u> ) <u>9</u> Area Code & Daytime 1	61-0200
	Name c	of Person	Area Code & Daytime	lelephone Number
Enclose	ed is a check for t	he following amount:		
<b>₹</b> \$25.	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIEI Registration Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ions er Circle

L



### 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: NORTHCAY, 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: L 07000033439

4. I. MARK S. SABA

hereby resign as a Managing Member

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

PH jT) မ္မ 20

CR2E079 (5/06)

# JOINT WRITTEN CONSENT OF THE MANAGER AND MEMBERS OF



ħ.

### NORHTCAY, LLC

The undersigned, being all of the Members of NORTHCAY, LLC, finding it inconvenient to assemble in formal meeting, do hereby consent to the adoption of the following resolutions pursuant to the provisions of Section 608, Florida Statutes:

### Resignation and Withdrawal of Members

WHEREAS, the Members deem it be in the best interest of the Company that each of the following members resign and surrender and transfer back to the Company their respective membership interest units in the Company and that the withdraw of said Members be approved:

<u>Member Name</u>	Units Owned & Surrendered
Mark S. Saba	100

WHEREAS, the Managers deem it in the best interest of the Company that Mark S. Saba be removed as a signatory on any and all bank accounts of the Company.

NOW, THEREFORE. BE IT

RESOLVED, that the resignation of Mark S. Saba as a managing member of the Company is hereby approved effective as of the <u>14</u> day of  $M_{SUERSEC}$ , 2010; and

DATED this 14 of November 2010.

**BRENT BALLARD, MANAGER/MEMBER**