

L07000 648218

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

OCT 18 2011

EXAMINER

JACK W. CROOKS

ATTORNEY AT LAW

P.O. Box 10339

Tampa, Florida 33679-0339

Tel: (813) 259-4018 * Facsimile: (813) 259-4071

October 13, 2011

Registration Division

Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

SUBJECT: CENTRAL FLORIDA INSURANCE AGENCY, LLC

Doc No. L07000048218

Dear Sir:

Please find the enclosed Articles of Amendment, Resignation, and fee(s) which are submitted for filing. Please return all correspondence and direct any questions concerning this matter to the above captioned office.

For additional information concerning this matter, please contact: Jack W. Crooks, Attorney at Law, at (813) 817-3281.

Enclosed is a check for \$50.00 which includes the below stated items:

- ☐ \$25.00 Filing Fee for Articles of Amendment
- ☐ \$25.00 Filing Fee for Resignation

Thanking you in advance for your assistance, I remain

Sincerely yours,



Jack W. Crooks
Fl Bar No. 155231

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

1. The name of the limited liability company as it appears on the records of the
Florida Department of State is: CENTRAL FLORIDA INSURANCE AGENCY, LLC
2. This limited liability company was organized under the laws of:
The State of Florida
3. The Florida document / registration number of this limited liability company is:
L07000048218
4. I, Poe & Associates, LLC, hereby resign as a Managing Member, MGRM, of this limited
liability company and affirm the limited liability company has been notified of my
resignation in writing.

Dated: OCTOBER 13, 2011.

Poe & Associates, LLC. MGRM
(Typed or printed name of Signee)

Poe Financial Group, Inc. MGRM for Poe & Associates, LLC.

By: William F. Poe, Sr.
President, Chairman, & Director
Poe Financial Group, Inc.


(Signature of Managing Member)

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