L07000061589

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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05/13/11--01012--004 **25.00

SECRETARY OF STATE DIVISION OF CORPORATION

N. Cultigan MAY 1 6 2011

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	NECT: 800 S WOODLAND,	LLC
	(Name of L	imited Liability Company)
The enfiling.		or manager resignation and fee(s) are submitted for
Please	e return all correspondence concernin	g this matter to:
HAN	ISRAJ PALEJA	
	(Contact Person)	
800	S WOODLAND, LLC	
	(Firm/Company)	
1213	3 ANDES DRIVE	
	(Address)	
WIN	TER SPRINGS, FL 32708	
	(City/State and Zip Code)	
For fu	orther information concerning this ma	tter, please call:
HAN	ISRAJ PALEJA	at (321) 689-6568
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclo	sed please find a check made payable	to the Florida Department of State for:
	\$25 Filing Fee	\$55 Filing Fee &
	_	Certified Copy
STRE	EET/COURIER ADDRESS:	MAILING ADDRESS:
_	tration Section	Registration Section
	on of Corporations	Division of Corporations
	n Building	P.O. Box 6327
	Executive Center Circle tassee, Florida 32301	 Taffalfassee, Florida 32314
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CR2E079 (5/06)





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 of State is: 800 S W		appears on the record	s of the Florida Department
2. This limited liability con FLORIDA	npany was organized ur	nder the laws of:	
3. The Florida document/reL07000061589	gistration number of th	is limited liability cor	npany is:
4. I, JAMES K GULD (Print Name of Poor of this limited liability coresignation in writing.	erson kesigning)		MANAGING MEMBER (Print Title) ny has been notified of my
Signature of Resigning M	Guldu Tember, Managing Men	nber or Manager	
Filing Fee: \$25. Certified Copy: \$30.	• •		