L07000080558

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| | | | | |
| (Address) | | | | |
| (Address) | | | | |
| (| | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| | | | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
| L. SELLERS | | | | |
| MAR - 5 2008 | | | | |

Office Use Only

EXAMINER



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SECRETARY OF STATE TALLAHASSEE. FLORIDA

FLED

COVER LETTER

| Division of Corporations | | | | | |
|---|--|--|--|--|--|
| SUBJECT: Princess Lady, LLC (Name of Limited Liability Company) | | | | | |
| The enclosed member, managing member or manager resignation and fee(s) are submitted for filing. | | | | | |
| Please return all correspondence concerning this matter to: | | | | | |
| David C. Norris (Contact Person) | | | | | |
| Princess Lady, LLC (Firm/Company) | | | | | |
| 550 Port O Call Way (Address) | | | | | |
| Naples FL 34102 (City/State and Zip Code) | | | | | |
| For further information concerning this matter, please call: | | | | | |
| James A. Reider at (608) 791-3512 (Area Code & Daytime Telephone Number) | | | | | |
| (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$ Certified Copy | | | | | |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 | | | | | |

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

| | limited liability company as | it appears on the record | s of the Florida Department |
|---|--|-----------------------------|-----------------------------|
| This limited liabi | lity company was organized | l under the laws of: | |
| 3. The Florida docu <u>L0700008</u> | ment/registration number of | f this limited liability co | mpany is: |
| _{4. I.} Haley Sofge | | , hereby resign as a | MGRM |
| (Print Name of Person Resigning) | | | (Print Title) |
| of this limited lial resignation in wr | | e limited liability comp | any has been notified of my |
| Signature of Resi | gning Member, Managing N | Member or Manager | |
| | \$25.00 (Required) \$30.00 (Optional) | | 2008 MA SECRE TALLAI |

CR2E079 (5/06)

2008 MAR THE PM 2: 55
SECRETARY OF STATE