L070000999551

(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:

Office Use Only



700136329587

09/30/08--01005--007 **877.50

DEPARTY HT OF STATE NVISION OF CORPORATIONS TALLAMASSEE, FLORIDA RECEIVED

08 SEP D AH ID: 42

SCOULARY OF STATE TALLAHASSEE, FLORIDA

B. KOHR

SEP 30 2008

EXAMINER

COVER LETTER

CR2E079 (5/06)

TO: Registration Section Division of Corporations	· · · · · · · · · · · · · · · · · · ·
SUBJECT: BAYTREEE TOWNHOMES, LLC	
	Liability Company)
The enclosed member, managing member or ma filing. Please return all correspondence concerning this	matter to:
AMY N. HORNE	P 29 PH 3: 43
(Contact Person)	F. 3
SMITH, THOMPSON, SHAW & MANAUSA, PA	FLORIE SILVE
(Firm/Company)	
3520 THOMASVILLE ROAD FOURTH FLOOR (Address)	<u> </u>
TALLAHASSEE, FL 32309 (City/State and Zip Code)	
For further information concerning this matter, p	please call:
AMY N. HORNE at	(850) 893-4105
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the x \$25 Filing Fee	e Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
i ananassee, munua 32301	



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 lin	nited liability company as it appears on the records of the Florida Department
of State is: BA	YTREE TOWNHOMES, LLC
•	E SE T
2. This limited liabilit	ty company was organized under the laws of:
FLORIDA	
3. The Florida docum	ent/registration number of this limited liability company is:
L07000099551	
of this limited liabil resignation in writin	s, Managing Member of *, hereby resign as a Managing Member re of Person Resigning AMB Development and Construction Title) lity company and affirm the limited liability company has been notified of my ng. Member, Managing Member or Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)