108000012236

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	·
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status

Special Instructions to Filing Officer:

L. SELLERS

APR 23 2008

EXAMINER

Office Use Only



100119785401

03/14/08--01006--009 **35.00

SECRETARY OF STATE

T I I I

Amendment Section Division of Corporations Clifton Building

To Whom It May Concern:

The enclosed form and check are for a request of resignation of a director of a LLC. An initial request was sent out yesterday without payment. This request includes the required payment.

Thank you for your attention to this matter.

Sincerely,

Laura Gray Dean

COVER LETTER

TO: Registration Section **Division of Corporations** The enclosed member, managing member or manager resignation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: (Firm/Company) For further information concerning this matter, please call: at (727) 488-337 (a (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$55 Filing Fee & Certified Copy STREET/COURIER ADDRESS: **MAILING ADDRESS:**

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



March 19, 2008

JUSTIN DEAN 321 10TH AVENUE NORTH ST. PETERSBURG, FL 33701

SUBJECT: OLD NORTHEAST PROPERTIES, LLC

Ref. Number: L08000012236

We have received your document for OLD NORTHEAST PROPERTIES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is a limited liability company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 508A00016606

Leslie Sellers Regulatory Specialist II



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

The name of the limited liability company as it appears on the records of the Florida Department of State is: Od Northeast Poperties, LLC.
This limited liability company was organized under the laws of:
The Florida document/registration number of this limited liability company is: LO8000017736 I, Lauca (2004) Dean, hereby resign as a manager
(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.
1 Dean
Signature of Resigning Member, Managing Member or Manager

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

ertified Copy: \$30.00 (Opt

SECRETARY OF STATE