

L08000027578

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

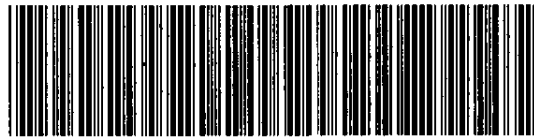
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

APR 13 2009

EXAMINER



*results matter*

Deanne K. Claiborne  
deanne.claiborne@burr.com  
Direct Dial: (407) 647-4455  
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P. O. Drawer 1690  
Winter Park, FL 32790  
369 N. New York Avenue  
Third Floor  
Winter Park, FL 32789

Office (407) 647-4455  
Fax (407) 740-7063

BURR.COM

April 8, 2010

**VIA U.S. MAIL**

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

**Re: M3 Longwood, LLC**

Dear Sir/Madam:

Please find enclosed with this letter the following:

1. Resignation of M2 Maitland, LLC as managing member of M3 Longwood, LLC;
2. Resignation of ST Altamonte, LLC as managing member of M3 Longwood, LLC;
3. Statement of Change of Registered Agent for M3 Longwood, LLC (New Agent: Dudley Q. Sharp, Jr.); and
4. Our firm's check no. 4040 in the amount of \$75.00 representing three filing fees of \$25.00 each for the above referenced transactions.

Upon completion of filing please send verification of the same.

Please contact me if you have any questions regarding this matter.

Sincerely,

Deanne K. Claiborne  
Legal Secretary

DKC/dc  
Enclosures

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10 APR 12 AM 7:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** M3 LONGWOOD, 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:

Dudley Sharp/ Gidget

(Contact Person)

Burr & Forman LLP

(Firm/Company)

369 N. New York Avenue, 3rd floor

(Address)

Winter Park, Florida 32789

(City/State and Zip Code)

For further information concerning this matter, please call:

Gidget Truax

(Name of Contact Person)

at ( 321 ) 280-7907

(Area Code & Daytime Telephone Number)

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:**

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

**MAILING ADDRESS:**

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

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TALLAHASSEE, FLORIDA



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 liability company as it appears on the records of the Florida Department of State is: M3 LONGWOOD, LLC

2. This limited liability company was organized under the laws of:  
Florida

3. The Florida document/registration number of this limited liability company is:  
L08000027578

4. I, SR ALTAMONTE, LLC, hereby resign as a managing member  
*(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.

Signature of Resigning Member, Managing Member or Manager

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

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10 APR 12 AM 7:27  
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