15852000801

(Requestor's Name)				
(Address)				
(Address)				
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PICK-UP	☐ WAIT	MAIL		
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EXAMINER



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09 AUG 28 AM 8: 13

DIVISION OF CORPORATION

COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT:	lowey Realty, LLC
	(Name of Limited Liability Company)
The enclosed member, managin filing.	g member or manager resignation and fee(s) are submitted
Please return all correspondence	concerning this matter to:
Michael A. Croak	
(Contact Per	son)
Michael A. Croak, P.A	
(Firm/Comp	eany)
2785 S. Bay Street S (Address	
Eustis, FL 32726	
(City/State and	Zip Code)
For further information concern	ning this matter, please call:
Michael A. Croak	at (352) _ 357-9208
(Name of Contact Pers	
r	
x \$25 Filing Fe	nade payable to the Florida Department of State for: ee \$\sum_\$55 Filing Fee & Certified Copy
STREET/COURIER ADDR	-
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314

Tallahassee, Florida 32301

CR2E079 (5/06)

SECRETARY OF STATE DIVISION OF CORPORATIONS



09 AUG 28 AM 8: 13

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 li	mited liability company as it a	ppears on the records of	of the Florida Department
of State is:	Howey Realty, LLC		
		·	
2. This limited liabil	ity company was organized ur	der the laws of:	
Florida		.	
3. The Florida docur	nent/registration number of th	is limited liability com	pany is:
L08000063826	_		
		_	
4. I, Andrea L.		, hereby resign as a _	
(Print Na	me of Person Resigning)	• •	(Print Title)
of this limited liab resignation in writ	ility company and affirm the ling.	imited liability compan	y has been notified of my
			•
(Indre	ad Straub	· .	
Signature of Resignature Andrea L. Stra	gning Member, Managing Menub	nber or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		