

LO8000063908

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

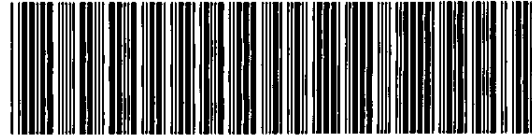
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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01/23/12--01026--016 \*\*25.00

FILED  
12 JAN 28 AM 10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

JAN 25 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 6, 2012

KEVIN J BROWN  
521 N. GRAHAM ST #1B  
CHARLOTTE, NC 28202

SUBJECT: SAVAGE YACHTS L.L.C.  
Ref. Number: L08000063908

We have received your document for SAVAGE YACHTS L.L.C., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

We are enclosing the proper form(s) with instructions for your convenience.

The fee to file your limited liability company document is \$25. Please include an additional \$30 for each certified copy (optional) requested and an additional \$5 for each certificate of status (optional) requested.

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) 245-6984.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 712A00000355

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12 JAN 23 AM 10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SAVAGE YACHTS 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:

Kevin Brown  
(Contact Person)

SAVAGE YACHTS LLC  
(Firm/Company)

521 N Graham St #13  
(Address)

Charlotte NC 28202  
(City/State and Zip Code)

For further information concerning this matter, please call:

Kevin Brown at ( 704 ) 648 8247  
(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

☐ \$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

FILED  
12 JAN 23 AM 10  
CLERK OF STATE  
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: SAVAGE YACHTS 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:  
8000063908

4. I, Kevin Brown, hereby resign as a VP  
(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]  
Signature of Resigning Member, Managing Member or Manager

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

FILED  
12 JAN 23 AM 10:10  
CLERK OF STATE  
TALLAHASSEE, FLORIDA