

L08000672980

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

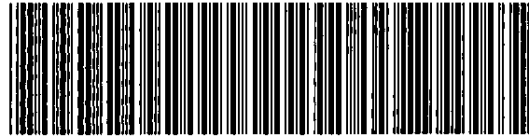
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

T. HAMPTON

JUL 20 2011

EXAMINER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** OPSEC INVESTIGATION, Florida  
(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:

Walter A. Pask, Jr  
(Contact Person)

OPSEC INVESTIGATION, Florida  
(Firm/Company)

P.O. Box 86652  
(Address)

MADRID BEACH, FL 33738  
(City/State and Zip Code)

For further information concerning this matter, please call:

Walter Pask at ( 727 ) 422-1119  
(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

11 JUL 22 PM 4:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

July 14, 2011

WALTER PASK  
P O BOX 86652  
ST PETERSBURG, FL 33738

SUBJECT: OPSEC INVESTIGATION, FLORIDA LLC  
Ref. Number: L08000072980

We have received your document for OPSEC INVESTIGATION, FLORIDA 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 the corrected original and one copy of 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) 245-6855.

Tammy Hampton  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 611A00016763



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: OPSEC INVESTIGATION, Florida

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

3. The Florida document/registration number of this limited liability company is:  
LOP 0000 72980

4. I, James K. Moffitt, hereby resign as a Officer  
(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.

James K. Moffitt  
Signature of Resigning Member, Managing Member or Manager

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

FILED  
11 JUL 22 AM 9:49  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS