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SECRETARY OF STATE

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TO:

CR2E079 (5/06)

TO: Registration Section	
Division of Corporations	
SUBJECT: Westchase Holdings,	LLC
(Name of Lin	nited Liability Company)
The enclosed member, managing member of filing.	or manager resignation and fee(s) are submitted for
Please return all correspondence concerning	g this matter to:
Scott Slayton	
(Contact Person)	
	2008 N
(Firm/Company)	
4114 Amber Lane	SECRETARY OF STATI FALLAHASSEE. FLORI
(Address)	FIG.
Palm Harbor, Florida 34685	ATE DRIDA
(City/State and Zip Code)	
For further information concerning this mat	ter, please call:
Scott Slayton	at (727) 797-5902
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable \$\sum_{\subset}\$\$ \$\frac{1}{2}\$\$ \$\frac{1}{2}\$\$ Filing Fee -	to the Florida Department of State for: \$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

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

	nited liability company as chase Holdings, LL	• •	rds of the Florida	Depar	tment
2. This limited liability State of Flori	y company was organized da	under the laws of:	LAHASSEE.	8 NOV -4 PM	
3. The Florida docum L080000992	ent/registration number of	this limited liability o	ompany is:DA	3:51	O
4. I, Robert Nelson , hereby resign (Print Name of Person Resigning) of this limited liability company and affirm the limited liability coresignation in writing.					
Signature of Resign	ing Member, Managing M	lember or Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	·			