

LO8000/06469

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

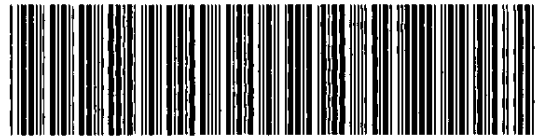
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/24/09--01029--019 **85.00

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09 MAR 24 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PA Resign
Teers
3-31-09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Unlimited Expectations of SWFL, LLC
(Name of Limited Liability Company)

DOCUMENT NUMBER: L08000106469

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Allen Jenkins
(Name of Person)

(Name of Firm/Company)

7350 S. Tamiami Tr #105
(Address)

Sarasota, FL 34231
(City/State and Zip Code)

Only in regards
to my resignation,
All documentation to
Managing member

For further information concerning this matter, please call:

Allen Jenkins at (941) 228-6785
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

March 23, 2009

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

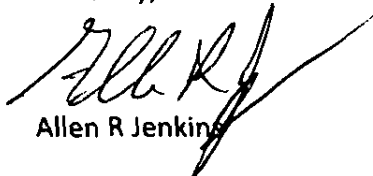
To whom it may concern:

Please change the mailing address and the Principal address (these are my addresses and I do not wish to receive correspondence in regard to this LLC) for Unlimited Expectations of SW FL LLC to the managing members address below:

CARTER, DOUGLAS L
1280 BELAIRE CT
NAPLES FL 34110

I have enclosed a resignation of Registered Agent form and request my name and address be removed from Unlimited Expectations of SW FL, LLC.

Sincerely,



Allen R. Jenkins

7350 S. Tamiami Trail #105

Sarasota, FL 34231

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

FILED
09 MAR 24 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

Allen R. Jenkins, hereby resigns as
(Name of Registered Agent)

Registered Agent for Unlimited Expectations of SW FL, LLC
(Name of Limited Liability Company)

L08000106469
(Document Number, if known)

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

Allen R. Jenkins
(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

FILING FEES:

- \$ 85.00 Active limited liability company
- \$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314