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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Austin and Stevens, Inc.
(Name of Corporation)
DOCUMENT NUMBER: P08000106901
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Scot B. Copeland
(Name of Person)
Emmanuel, Sheppard & Condon, P.A.
(Name of Firm/Company)
195 Grand Boulevard, Suite 101
(Address)
Miramar Beach, FL 32550
(City/State and Zip Code)
For further information concerning this matter, please call:
Scot B. Copeland at (850)460-8000 (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

2. The Florida doc L0800010966	•	ssigned to this limited liability company is:	
3. The date this me	ember/manager withdrew/res	igned or will withdraw/resign is:	
4. I, Benjamin A.	Stevens, III Jame of Person Resigning)	hereby withdraw/resign as a	
Manager/Mer			
	(Print Title)		
resignation in wr		e limited liability company has been notified of my	
	\$25.00 (Required) \$30.00 (Optional)	THE WAY IN	·