

LD9000001332

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

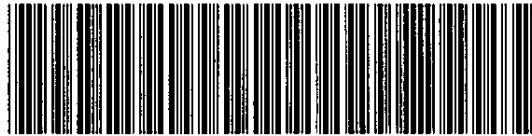
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TALLAHASSEE, FLORIDA

T. CLINE

FEB 23 2010

EXAMINER

LAW OFFICES OF  
**FRANK JOSEPH HESTON, P.A.**

3300 UNIVERSITY DRIVE  
SUITE 311  
CORAL SPRINGS, FLORIDA 33065

TELEPHONE: (954) 755-7800  
FAX: (954) 344-0288

E-MAIL: [FJHESTON@BELLSOUTH.NET](mailto:FJHESTON@BELLSOUTH.NET)

February 19, 2010

**VIA REGULAR U.S. MAIL**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, Florida 32314

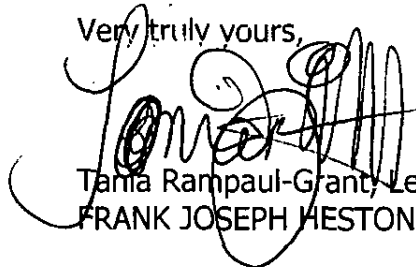
**RE: Resignation of Managing Member - Veronica Lopez**  
**Florida Swimming Schools, LLC**

Dear Sir or Madam:

Enclosed please find a completed **Cover Letter**, and **Resignation of Member, Managing Member or Manager From Florida Limited Liability Company**. Also enclosed is Check No. 8096, dated February 19, 2010, in the amount of Twenty Five (\$25.00) Dollars, made payable to: Florida Department of State, for the Resignation filing fee.

Please send us an acknowledgment of filing of the Resignation. Thank you for your time and assistance in this regard.

Very truly yours,



Tania Rampaul-Grant, Legal Assistant to  
FRANK JOSEPH HESTON, ESQ.

FJH/trg  
Enclosures  
cc: Veronica Lopez

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FLORIDA SWIMMING SCHOOLS, 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:

Frank Joseph Heston, Esq.

(Contact Person)

Frank Joseph Heston, P.A.

(Firm/Company)

3300 University Drive Suite 311

(Address)

Coral Springs, Florida 33065

(City/State and Zip Code)

For further information concerning this matter, please call:

Frank Joseph Heston, Esq. at ( 954 ) 755-7800

(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

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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: FLORIDA SWIMMING SCHOOLS, 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:  
L09000001332

4. I, VERONICA LOPEZ, hereby resign as a Managing Member and/or Manager  
(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 of Resigning Member, Managing Member or Manager

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

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