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EXAMINER



COVER LETTER

TO: Registration Section **Division of Corporations SUBJECT:** Community Arts Group 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: Ron W Glines (Contact Person) Community Arts Group LLC (Firm/Company) 3145 Council Court (Address) Kissimmee, FL 34746 (City/State and Zip Code) For further information concerning this matter, please call: Ron W Glines (Name of Contact Person) 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: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 Tallahassee, Florida 32314 2661 Executive Center Circle

Tallahassee, Florida 32301

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	mited liability company as it appears munity Arts Group, LLC	s on the records of the Flo	orida Depar	tment
2. This limited liabili	ty company was organized under the	e laws of:	09 NOV ZU SEGRETARY FALLAHASSE	-
3. The Florida docum <u>L09000145</u>	nent/registration number of this limit 184	ed liability company is:	OF STATE	
4. I, Elizabeth G	lines, here	eby resign as a Member (Pr	er rint Title)	
resignation in writi	Juan		en notified o	of my
Signature of Resign	ning Member, Managing Member or	Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			

CR2E079 (5/06)