

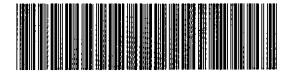
(Rec	questor's Name)	
(Add	dress)	
(Add	lress)	
(City	//State/Zip/Phone) #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	cument Number)	·
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

Office Use Only

G. MCLEOD

NOV 1.8 2011

EXAMINER



900214366149

11/17/11--01009--014 **55.00

IL NOV 17 PM 1:47

Transmittal Letter

November 14, 2011

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

Subject: Florida Farm Producer, LLC

The enclosed Resignation of Member is submitted for filing.

Please return all correspondence concerning this matter to:

Deborah Pastran, Esq. 333 NE Campbell Drive Homestead, FL 33090 Dpastran@aol.com

For further information concerning this matter, please call:

Deborah Pastran at 305-246-2122

Enclosed is a check for the following amount:

\$ 55.00 Filing Fee and Certified Copy

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA 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 Farm Producer, LLC.
- 2. The limited liability company as organized under the laws of Florida.
- 3. The Florida document/registration number of this limited liability company is **L09000023891**.
- 4. I, **Jimmy Uy**, hereby resign as a MGRM of this limited liability company and affirm the limited liability company has bee notified of my resignation in writing.

Jimmy Uy, Managing Member

11 NOV 17 PM 1:47
SECRETARY OF STATE