

L09000025702

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

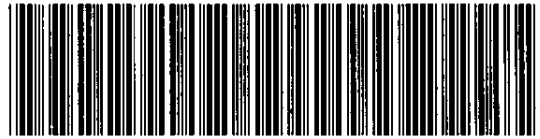
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09 NOV 24 AM 11:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

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NOV 13 2009

NOV 25 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 13, 2009

FRANK COUSINS  
C C & G FINANCIAL GROUP, LLC  
1761 W. HILLSBORO BLVD. #201  
DEERFIELD BEACH, FL 33442

SUBJECT: C C & G FINANCIAL GROUP, LLC  
Ref. Number: L09000025702

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for C C & G FINANCIAL GROUP, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan  
Regulatory Specialist II

Letter Number: 609A00035480

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CC & G Financial Group LLC  
(Name of Limited Liability Company)

**FILED**  
09 NOV 24 AM 11:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Frank Cousins  
(Contact Person)

CC & G Financial Group  
(Firm/Company)

1761 W. Hillshire Blvd #201  
(Address)

Deer Field Beach FL 33442  
(City/State and Zip Code)

For further information concerning this matter, please call:

Frank Cousins at (877) 420-5182  
(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



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: CCA Financial Group, 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:

L09090025502

4. I, Philip Giberson, hereby resign as a 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

FILED  
09 NOV 24 AM 11:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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