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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Da	cument Number)	
(DO	cument Number)	;
Certified Copies	Certificates	s of Status
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Special Instructions to I	Filing Officer:	

G. MCCEOD AUG 3 1 2009

EXAMINER



400158453384

08/27/09--01007--008 **25.00

09 AUG 28 AM 10: 27

SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 4 GIRLS FARM 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:
Selena Phipps (Contact Person)
(Firm/Company)
321 Smith Road (Address)
321 Smith Road (Address) Apalachieola Fl 32320 (City/State and Zip Code)
For further information concerning this matter, please call:
Seleva Phipps (Name of Contact Person) at (850) 653 - 2450 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle Tallahassee, Florida 32301



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:
2. This limited liability company was organized under the laws of:
FLORIDA.
3. The Florida document/registration number of this limited liability company is:
4. I, Julie EIDSON, hereby resign as a Managing Monther (Print Name of Person Resigning), hereby resign as a Managing Monther (Print Hille)
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
> Signature of Resigning Melitoer, Managing Melitoer of Manager

09 AUG 28 AM ID: 27

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 30, 2009

SELENA PHIPPS 321 SMITH ROAD APALACHICOLA, FL 32320

SUBJECT: 4 GIRLS FARM, LLC Ref. Number: L09000026513

We have received your document for 4 GIRLS FARM, LLC and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Each individual must be submitted on a separate form and a check for \$25.00.

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) 245-6851.

Gina McLeod Regulatory Specialist II

Letter Number: 409A00026187

Division of Cornorations - P.O. BOX 6327 - Tallahassee Florida 32314