

LD9000032221

(Requestor's Name)

(Address)

(Address)

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(Business Entity Name)

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N. Culligan APR 12 2011

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** VP PASCO, LLP

(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:

Ilaben V. Patel

(Contact Person)

VP PASCO, LLC

(Firm/Company)

4628 Mayflower Drive

(Address)

New Port Richey, FL 34652

(City/State and Zip Code)

For further information concerning this matter, please call:

Ilaben V. Patel

(Name of Contact Person)

727

844-0976

(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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11 APR 11 PM 1:04

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: VP PASCO, 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:  
L09000032221.

4. I, Vijay I. Patel, hereby resign as a Managing Member  
(*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.

A handwritten signature in black ink that reads "Vijay Patel".

Signature of Resigning Member, Managing Member or Manager

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