

L09000079843

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200241685752

11/13/12--01037--003 **50.00

12 NOV 13 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

D. BRUCE
NOV 14 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BARNES MARINE GROUP
(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:

GRAHAM BARNES
(Contact Person)

BARNES MARINE GROUP.
(Firm/Company)

3261 SW 23RD COURT
(Address)

FORT LAUDERDALE, FLORIDA, 33312
(City/State and Zip Code)

For further information concerning this matter, please call:

GRAHAM BARNES at (954) 388-3584
(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 NOV 13 PM 3:00

APPROVED
AND
FILED



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: BARNES MARINE GROUP

2. This limited liability company was organized under the laws of:
FLORIDA

3. The Florida document/registration number of this limited liability company is:
LO9000079843

4. I, CHRISTINE L BARNES, 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.

Christine L Barnes

Signature of Resigning Member, Managing Member or Manager

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

12 NOV 13 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED