

L09000083369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

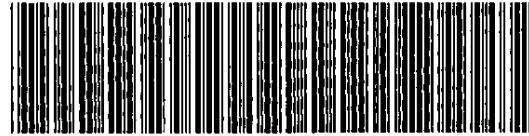
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

SEP - 9 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Canopy Red, 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:

Jon Schmidt

(Contact Person)

(Firm/Company)

8012 Oak Grove Plantation Road

(Address)

Tallahassee, Florida 32312

(City/State and Zip Code)

For further information concerning this matter, please call:

Jon Schmidt

(Name of Contact Person)

at (850) 508-7306

(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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TALLAHASSEE, FLORIDA

**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 CANOPY RED, 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 L09000083369.
4. I, Nicholas Cleary, hereby resign as a Member of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.



Nicholas Cleary

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