## L0900084690

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
;			
: (Business Entity Name)			
<u> </u>			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



700160173487

09/21/09--01011--020 \*\*\*25.00

SECRETARY OF STATE OF STATE OF CORPORALISM

T. HAMPTON

SEP 2 2 2009 -

**EXAMINER** 

## **COVER LETTER**

Division of Corporations	
SUBJECT: Resignation of Managir	
(Name of Limi	ted Liability Company)
The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning	this matter to:
William Graham Underwood	
(Contact Person)	
SWFL ONLINE LLC	<del> </del>
(Firm/Company)	
3440 Marinatown Lane Suite 201	
(Address)	
North Fort Myers, FL 33903	
(City/State and Zip Code)	
For further information concerning this matter	er, please call:
W. Graham Underwood	at ( 239 ) 656-8881
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to	o the Florida Department of State for:
\$25 Filing Fee	\$55 Filing Fee &
	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327
Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company as FL ONLINE LLC	it appears on the records of the Florida Department
2. This limited liab	ility company was organized	d under the laws of:
3. The Florida doce	_	f this limited liability company is:
4. I. Elizabeth	_ Nichols  Jame of Person Resigning)	. hereby resign as a MGRM (Print Title)
	bility company and affirm th	te limited liability company has been notified of my
Clinature of Resi	gning Member, Managing N	Member or Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	<i>ه</i>

CR2E079 (5/06)