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T. CLINE
MAR - 2 2010
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: SILVER LEAF NA, LLC. (Name of Limited Liability Cor	mpany)	
The enclosed member, managing member or manager resig filing.		
Please return all correspondence concerning this matter to:		
DENNIS J SZCZECH (Contact Person)	_	
SILVER LEAF NA, LLC	- d . 22	
(Firm/Company) 1073 WILLA SPRINGS DR STE 1057	2010 MAR - I PHE LATE SECRETARY OF STATE TALLAMASSEE, FLORID	7
(Address) WINTER SPRINGS, FL. 32708	SSEE.F	FILE
(City/State and Zip Code)	- LORIDE 5	7
For further information concerning this matter, please call:		
DENNIS J SZCZECH at (Mane of Contact Person) at (Area Code	574-2955 & Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida D \$25 Filing Fee	Department of State for: \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations	

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

Clifton Building

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

	limited liability company		ars on the record	s of the Flori	da Departme	ent _·
2. This limited liab	lity company was organi	ized under	the laws of:	·	2010 MAR - SECRETAR TALLAHASI	~ Y
3. The Florida docu 	ment/registration numbe	er of this li	nited liability cor	npany is:	AR -1 PM	רח
4. I, LISA L MO	OORE ame of Person Resigning)	, l:	iereby resign as a	MGRM (Prin	STATE (TARE)	, 51m
of this limited liab resignation in wri	oility company and affirm	n the limite	ed liability compa	ny has been	notified of n	ıy
Lisa	Moore					
Signature of Resi	gning Member, M anagin	ig Member	or Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)					