## L09000012047

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
•					
Certified Copies Certificates of Status					

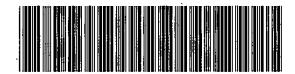
Special Instructions to Filing Officer:

L. SELLERS

APR - 5. 2010

**EXAMINER** 

Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Bradenton Charters 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:
George L. Smith (Contact Person)
Bradenton Charters LLC (Firm/Company)
7322 Manatee Ave. W 188 (Address)
Bradenton, FL 34209 (City/State and Zip Code)
For further information concerning this matter, please call:
George L. Smith at (941) 962-5754  (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 P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 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

	mited liability company as it radenton Charte		f the Florida Department
2. This limited liabili	ity company was organized u	nder the laws of:	
	nent/registration number of the 1092047	his limited liability comp	any is:
4. I, <u>Kathle</u> (Prini Nan	en Smith ne of Person Resigning)	, hereby resign as a	Member (Print Title)
of this limited liabi resignation in writi	lity company and affirm the ling.	limited liability company	has been notified of my
Kallel	In Smith	<u></u>	
Signature of Resign	ning Member, Managing Me	mber or Manager	
Filing Fee: Certified Copy:	` - '		

CR2E079 (5/06)

10 APR -2 PM 3: 32
SECRETARY OF STATE