

LD9 000104880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

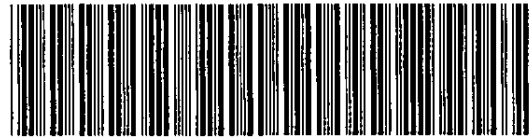
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
T. CLINE  
JUL 24 2012  
EXAMINER

*Crabtree Law Group, P.A.*

ATTORNEYS AND COUNSELORS AT LAW

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June 11, 2012

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Florida Department of State  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: Pine Acres Road, LLC**  
**Ref. No.: L09000104880**

Dear Sir/Madam:

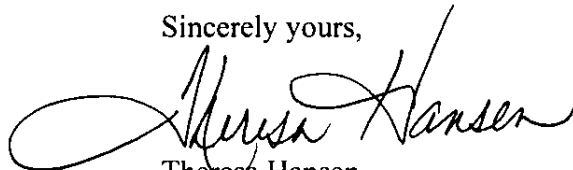
Enclosed please find the following for the above-referenced entity:

1. Statement for Change of Registered Office or Registered Agent or Both for Limited Liability Company;
2. Our firm check in the amount of \$25.00 as payment of the filing fee for the Change of Registered Agent;
3. Resignation of Managing Member; and,
4. Our firm check in the amount of \$25.00 as payment of the filing fee for the enclosed Resignation.

As such, we would appreciate your filing same at your earliest convenience.

Thank you most cordially for your assistance in this regard. Should you have any questions or need additional information, please do not hesitate to contact us.

Sincerely yours,



Theresa Hansen  
Legal Assistant

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TALLAHASSEE, FLORIDA

/th  
enclosure (as above-sated)

### **RESIGNATION OF MANAGING MEMBER**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: **PINE ACRES ROAD, LLC.**
2. The above-limited liability company was organized under the laws of **State of Florida.**
3. The Florida Document Number for this limited liability company is: **L09000104880.**
4. I, **PAUL HASSAN,** hereby resign as **Managing Member** of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

  
\_\_\_\_\_  
Paul Hassan, Resigning Managing Member

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