## L09000119379

(Requestor's Name)
(Address)
(Address)
(Cit. (Chata /7) - (Dhana 14)
(City/State/Zip/Phone #)
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(Business Entity Name)
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SECRETARY OF STATE
SALIDAHASSEE. FLORID

D. BRUCE

FEB 15 2011

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: DUCKS & GATORS, LLC (Name of Limited Liability Con	nnon()
(Name of Limited Liability Con	npany)
The enclosed member, managing member or manager resig filing.	nation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
SCOTT MCLACHLAN	
(Contact Person)	_
DUCKS & GATORS, LLC	SEC
(Firm/Company)	AH.
2180 GLATTER ROAD	FEB 14 PM 3: 47 BRETARY OF STATE AHASSEE. FLORID
(Address)	
MALABAR, FL 32950 (City/State and Zip Code)	3: 47 STATE L'ORIDA
(City/State and Zip Code)	
For further information concerning this matter, please call:	
	<u> 403-3399</u>
(Name of Contact Person) (Area Code	& Daytime Telephone Number)
Enclosed please find a check made payable to the Florida D \$\forall \$\foral	Department of State for: 155 Filing Fee &
[V] +-> +g . ++	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 32314
2001 LACCULIYE CELLEL CITCLE	rananassee, Fioriua 32314

Tallahassee, Florida 32301

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	e limited liability company as ICKS & GATORS, LL	s it appears on the records of the	he Florida Department
2. This limited liab	oility company was organized	d under the laws of:	
3. The Florida doc L0900011	•	f this limited liability compan	y is:
4. I, DAVID BE		, hereby resign as a MA	NAGER
	- • •	ne limited liability company ha	(Print Title) as been notified of my
	Don		11 FU SEUR TALLA
Signature of Res	igning Member, Managing M	1ember or Manager	FEB 14 F URETARY C AHASSEE
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		PR STATE