

L10000003997

(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:

Office Use Only



900199187639

04/05/11--01002--008 **110.00

FILED
11 APR -4 PM 2:05
CLERK OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

APR 5 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Credit Advocates A Law Firm, 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:

Scott Silver

(Contact Person)

Scott Silver, PL

(Firm/Company)

8280 Cleary Blvd. #2814

(Address)

Plantation, FL 33324

(City/State and Zip Code)

For further information concerning this matter, please call:

Scott Silver

(Name of Contact Person)

at (954) 732-5122

(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
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED
11 APR - 1, PM 2:05
SEALPORT OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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

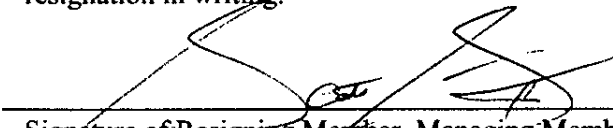
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Credit Advocates A Law Firm, LLC

2. This limited liability company was organized under the laws of:
Florida

3. The Florida document/registration number of this limited liability company is:
L10000003997

4. I, Scott Silver, PL, hereby resign as a Managing Member
(Print Name of Person Resigning) *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

 *on behalf of Scott Silver, PL.*
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

FILED
11 APR -4 PM 2:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA