1100000004851

(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 JUL 1 6 2010 EXAMINER						

Office Use Only



600183093306

07/15/10--01019--013 **25.00

SECRETARY OF STATE
TALLAHASSEE.FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: North Tampa Investments 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:
Paul O. Roberts (Contact Person)
North Tampa Investments LLC (Firm/Company)
12913 Forest Hills Dr (Address)
Tampa, F1 33612 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (727) 5-15-8584 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$ Certified Copy
STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations 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 Porth Tampo					
	ility company was organiz		f:			
L10000	ment/registration number OO4851 Orge Abwe	·			e /	•
	oility company and affirm				•	
Signature of Resi	ge alvey gning Member, Managing	Member or Manage	 er			
	\$25.00 (Required) \$30.00 (Optional)			SECRETAR TALLAHAS	10 JUL 19	

CR2E079 (5/06)