L100000004851

(Re	questor's Name)	. +0
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300262237403

08/04/14--01021--016 **25.00



108/14/14

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: North Tampa Investments LLC (Name of Limited Liability Company)			
(Name of Limited Liability Company)			
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to:			
Paul O. Roberts (Contact Person)			
North Tange 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:			
Paul O. Roberts at (727) 515-8589 (Name of Contact Person) (Area Code & Daytime Telephone Number)			
Enclosed please find a check made payable to the Florida Department of State for: \$\subseteq \\$25 \text{ Filing Fee & Certified Copy}\$\$			
STREET/COURIER ADDRESS: MAILING ADDRESS:			
Registration Section Registration Section			
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327			
110. 201. 022)			

Tallahassee, Florida 32314

2661 Executive Center Circle

Tallahassee, Florida 32301

CR2E079 (2/14)





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department
of State is: North Tampa Investments LLC.
2. The Florida document/registration number assigned to this limited liability company is:
L10000004851
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 7-28-2014
4. I, James C. Smith, hereby withdraw/resign as a (Print Name of Person Resigning)
Managing Member. (Prihi Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)