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PICK-UP	☐ WAIT	MAIL			
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EXAMINER

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SECRETARY OF STATE

## **COVER LETTER**

TO: Registration Section Division of Corporations							
SUBJECT: Clear Water Vacations 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:							
Anthony Vernon (Contact Person)							
Clear Water Vaccations LLC (Firm/Company)							
10181 W Sauple Rd #204							
Coral Armys FL 33065  (City/State and ZipCode)							
For further information concerning this matter, please call:							
(Name of Contact Person) at (154) 540 9759 (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 3230!  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314							

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as it ap Lear Water V	· 1		partment
2. This limited liabi	lity company was organized und	er the laws of:		
	ment/registration number of this るめり45580	limited liability comp	SECRETA TALLAHAS	20 DANG -
4. I,	Leta une of Person Resigning)	, hereby resign as a _	M6 Print-Fille)	
resignation in wri	ility company and affirm the limiting.  Sining Member, Managing Member, Managing Member.		has been notifie	ed of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			