

# L10000050311

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

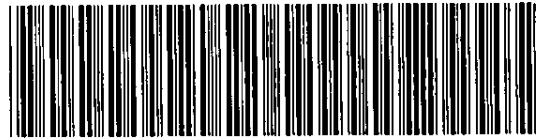
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2013 MAR 27 AM 8:31  
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TALLAHASSEE, FLORIDA

N. Cullen MAR 27 2013

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PROVIDENCE DAIRY, 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:

Leenette W. McMillan-Fredriksson

(Contact Person)

McMillan Law Office, P.A.

(Firm/Company)

Post Office Box 1388

(Address)

Mayo, FL 32066

(City/State and Zip Code)

For further information concerning this matter, please call:

Leenette W. McMillan-Fredriksson at (386) 294-1688

(Name of Contact Person)

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 1, 2013

LENETTE W. MCMILLAN-FREDRIKSSON  
MCMILLAN LAW OFFICE, P.A.  
POST OFFICE BOX 1388  
MAYO, FL 32066

SUBJECT: PROVIDENCE DAIRY, LLC  
Ref. Number: L10000050311

We have received your document for PROVIDENCE DAIRY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must have a resignation form for each person resigning.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 713A00004940



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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

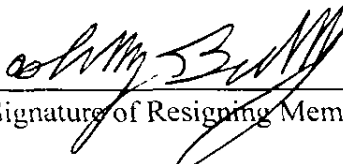
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: PROVIDENCE DAIRY, LLC

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

3. The Florida document/registration number of this limited liability company is:  
L10000050311

4. I, JOHN A. BAILEY, hereby resign as a MGRM  
*(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.

  
\_\_\_\_\_  
Signature of Resigning Member, Managing Member or Manager

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

FILED  
2013 MAR 27 AM 8:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA