## L10000051110

(Requestor's Name)					
(Add	Iress)				
(Add	lress)				
(City/State/Zip/Phone #)					
PICK-UP	WAIT	MAIL			
(Bus	iness Entity Na	me)			
(		,			
(Doc	ument Number)				
(500)	ament Namber,				
Cartified Caning	Cortificato	n of Status			
Certified Copies	Certificates	s or Status			
Special Instructions to Filing Officer:					
		:			
		i			

Office Use Only



300187737513

300187737513 11/23/10--01010--007 \*\*25.00

10 NOV 22 PH 10: 55

SECRETARY OF STATE-DIVISION OF CORPORATIONS

T. HAMPTON

NOV 2 4 2010

EXAMINER

## **COVER LETTER**

CR2E079 (5/06)

TO:	D: Registration Section Division of Corporations			
SUBJ	IECT:	Bellwether Appraisal S	Services	
		(Name of Lir	nited Liability Company)	
The e filing.		l member, managing member o	r manager resignation and fee(s) are submitted for	
Please	e return	all correspondence concerning	this matter to:	
Britt	on Ba	arnes		
		(Contact Person)		
Belly	wethe	er Appraisal Services	et de la companie de	
		(Firm/Company)		
1603	33 Ke	ealan Circle		
		(Address)		
Mon	itverd	le, FL 34771		
		(City/State and Zip Code)	<del>Port I</del>	
For fu	ırther iı	nformation concerning this mat	ter, please call:	
Britt	Barn	es	_ <sub>at (</sub> 352 <sub>)</sub> 250-9343	
	(N	ame of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclo	sed ple	ase find a check made payable	to the Florida Department of State for:	
	•	\$25 Filing Fee	\$55 Filing Fee &	
			Certified Copy	
STRE	EET/C	OURIER ADDRESS:	MAILING ADDRESS:	
Regist	tration	Section	Registration Section	
		Corporations	Division of Corporations	
	n Build		P.O. Box 6327	
		ive Center Circle	Tallahassee, Florida 32314	
Tallah	iassee,	Florida 32301		



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	the limited liability company as Bellwether Appraisal Se		of the Florida Departmen
	iability company was organized e of Florida	i under the laws of:	
3. The Florida d	locument/registration number of 051110	f this limited liability comp	oany is:
4. I, Andrew	K. Jones	, hereby resign as a _	Member
	nt Name of Person Resigning)	, , , , , , , , , , , , , , , , , , ,	(Print Title)
of this limited resignation in	liability company and affirm th writing.	e limited liability company	y has been notified of my
Signature of R	Resigning Member, Managing M \$25.00 (Required)	1ember or Manager	DIVISION OF

CR2E079 (5/06)

Certified Copy:

\$30.00 (Optional)