

From: 813-877-9290 To: 850-617-6383 Page: 2/4 Date: 11/15/2011 8:25:48 AM  
Division of Corporations

Page 1 of 1

L10000064676

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : GIBBONS, COHN, NEUMAN, BELLO & SEGALL & ALLEN, P.A.  
Account Number : I20000000178  
Phone : (813)877-9222  
Fax Number : (813)877-9290

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: plamb@gibblaw.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
SAM'S SUNSET, LLC

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J. BRYAN

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EXAMINER

**FAX**  
TRANSMISSION

To:

From:

Subject: SAM'S SUNSET LLC - L10000064876 - MANAGER RESIGNATION

Message:

Priscilla Lamb, Assistant to Gary A. Gibbons, Esquire  
Gibbons, Neuman, Bello, Segall, Allen & Halloran, P.A.  
3321 Henderson Boulevard  
Tampa, FL 33609  
Tel: 813 877-9222  
Fax: 813 877-9290  
[plamb@gibblaw.com](mailto:plamb@gibblaw.com)

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Circular 230 Notice: In accordance with Treasury Regulations which became applicable to all tax practitioners as of June 20, 2005, please note that any tax advice given herein (and in any attachments) is not intended or written to be used, and cannot be used by any taxpayer, for the purpose of (i) avoiding tax penalties or (ii) promoting, marketing or recommending to another party any transaction or matter addressed herein.



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SAM'S SUNSET, 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:

Gary A. Gibbons, Esq.

(Contact Person)

Gibbons, Neuman, Bello, Segall, Allen & Halloran, P.A.

(Firm/Company)

3321 Henderson Blvd.

(Address)

Tampa, Florida 33609

(City/State and Zip Code)

For further information concerning this matter, please call:

Gary A. Gibbons

(Name of Contact Person)

at ( 813 ) 877-9222

(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

CR2E079 (5/06)

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TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS**FILED**  
NOV 15 AM 8:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER  
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

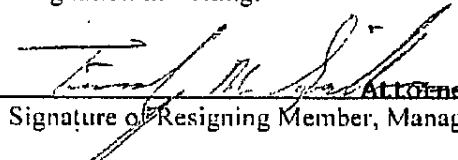
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: SAM'S SUNSET, LLC

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

3. The Florida document/registration number of this limited liability company is:  
L10000064676

4. I, Sam M. Gibbons, hereby resign as a Manager  
(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.

  
Attorney-In-Fact  
Signature of Resigning Member, Managing Member or Manager

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

CR2E079 (5/06)