

L10000067994

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

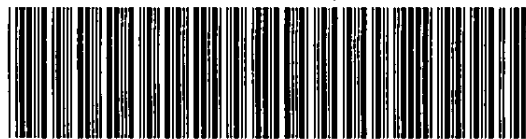
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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10/24/12--01009--009 \*\*55.00

12 OCT 24 AM 11:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

D. BRUCE  
OCT 25 2012  
EXAMINER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SARASOTA EXTREME FITNESS, 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:

MATT S. SMALLWOOD

(Contact Person)

(Firm/Company)

2120 WISTERIA STREET

(Address)

SARASOTA, FL 34239

(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERT A. PHINNEY

(Name of Contact Person)

at ( 941- ) 225-0712

(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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 OCT 24 AM 11:50

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AND  
FILED



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: SARASOTA EXTREME FITNESS, LLC

2. This limited liability company was organized under the laws of:  
THE STATE OF FLORIDA

3. The Florida document/registration number of this limited liability company is:  
L10000067994

4. I, MATT S. SMALLWOOD, 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)

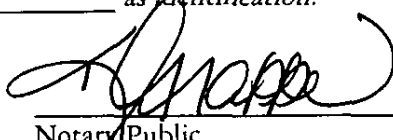
12 OCT 24 AM 11:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

State of Florida )

County of Sarasota )

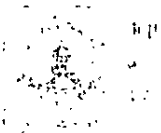
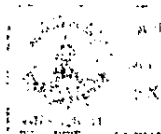
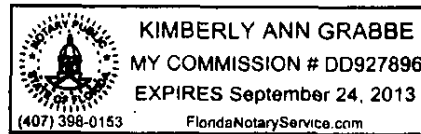
The foregoing instrument was acknowledged by me this 18<sup>th</sup> day of October, 2012,  
by Matt. S. Smallwood who is personally known by me or who has produced  
\_\_\_\_\_ as identification.



(SEAL)

Notary Public

My Commission Expires: 9-24-13



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