

L10000093168

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

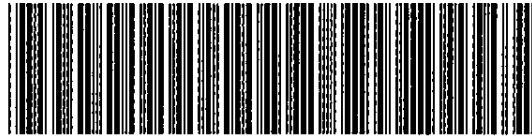
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

MAR 16 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 1, 2012

INES GOSS-BENDER
A1 FLORIDA DREAM VAC DEST SERVICES LLC
3405 SE 17TH AVE
CAPE CORAL, FL 33904

SUBJECT: A-1 FLORIDA DREAM VACATION DESTINATION SERVICES, LLC
Ref. Number: L10000093168

We have received your document for A-1 FLORIDA DREAM VACATION DESTINATION SERVICES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 812A00008280

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AI Florida Dream Vacation Destination
(Name of Limited Liability Company) Services LLC

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Ines Goss - Bender
(Contact Person)

AI Florida Dream Vacation Destination
(Firm/Company) Services LLC

1836 SE 1st Ter. Cape
(Address)

Cape Coral FL 33990
(City/State and Zip Code)

For further information concerning this matter, please call:

Ines Goss - Bender at (239) 628-8221
(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



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Al Florida Dream Vacation Destination Services, 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: L10000093168
4. I, Ines Goss-Bender, 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.

Ines Goss-Bender
Signature of Resigning Member, Managing Member or Manager

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