# LI0000129496

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# **COVER LETTER**

TO: Registration Section **Division** of Corporations

# SUBJECT: project s.o.a.r., 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:

michael aulbach

(Contact Person)

project s.o.a.r., lic

(Firm/Company)

2500 east las olas blvd. unit 1108 (Address)

ft lauderdale florida 33301

(City/State and Zip Code)

For further information concerning this matter, please call:

at (\_\_\_\_\_800 michael aulbach y 9220381 (Area Code & Daytime Telephone Number) (Name of Contact Person)

Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$55 Filing Fee & Certified Copy

### STREET/COURJER ADDRESS:

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

CR2E079 (5/06)

MAILING ADDRESS:

**Registration Section** Division of Corporations P.O. Box 6327 Taliahassee, Florida 32314



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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: project s.o.a.r., 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: L10000129496

4.1. terry d link

hereby resign as a <u>MGFM</u> (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing

(Print Name of Person Resigning)

Signature of Resigning Member, Managing Member of Manager

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

CR2E079 (5/06)

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