

L11000044546

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

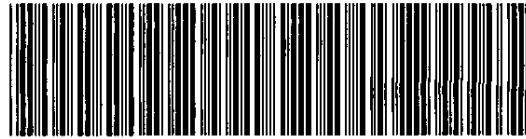
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200213164332

10/13/11--01007--003 **25.00

FILED
2011 OCT 13 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

OCT 14 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Native Canvas, 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:

Whitney B. Haines
(Contact Person)

Native Canvas, LLC
(Firm/Company)

600 S Caloosahatchee Ave.
(Address)

Jupiter, FL 33458
(City/State and Zip Code)

For further information concerning this matter, please call:

Whitney B. Haines at (561) 762-8483
(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



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: Native Canvas, 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:
L11000044546.
4. I, James Abell, hereby resign as a Managing Member
(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)

FILED
2011 OCT 13 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA