

L11000050040

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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(10) 10.14.14

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** EARLETON OAKS, LLC

(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to:

Paul D. Newell

(Contact Person)

Paul D. Newell, P.A.

(Firm/Company)

P.O. Box 1369

(Address)

Keystone Heights, FL 32656

(City/State and Zip Code)

For further information concerning this matter, please call:

Paul D. Newell

at ( 352 ) 473-4928

(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

October 2, 2014

PAUL D. NEWELL  
PAUL D. NEWELL, P.A.  
P O BOX 1369  
KEYSTONE HEIGHTS, FL 32656

SUBJECT: EARLETON OAKS, LLC  
Ref. Number: L11000050040

We have received your document for EARLETON OAKS, LLC and check(s) totaling \$500.00. However, your check(s) and document are being returned for the following:

Your check is being returned as it is not payable to this office. Please make your check payable to the Secretary of State and return it in order to complete your filing.

The fee to file your document is \$25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell  
Regulatory Specialist III

Letter Number: 014A00021090



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: EARLETON OAKS, LLC
2. The Florida document/registration number assigned to this limited liability company is:  
L11000050040
3. The date this member/manager withdrew/resigned or will withdraw/resign is: September 22,
4. I, Earnest W. Akins, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
Member and Manager  
*(Print Title)*

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

Signature of Dissociating Member or Resigning Manager

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

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