## L/1000064396

(Re	equestor's Name)
(Ad	ldress)
(Ad	ddress)
•	,
(C:+	ty/State/Zip/Phone #)
(CII	ty/State/Zip/Pflofie #)
PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(2	<u> </u>
(Do	ocument Number)
(DC	ocument Number)
0-45-40-4-	On the sales of Ohates
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	A 9
	A. LUNT
	MAY -8 2011
<u> </u>	EXAMINER

Office Use Only



80023425968
RHAY -4 PH 4: 8

REFLORII

REFLORI

05/04/12--01017--034 \*\*25.00

## **COVER LETTER**

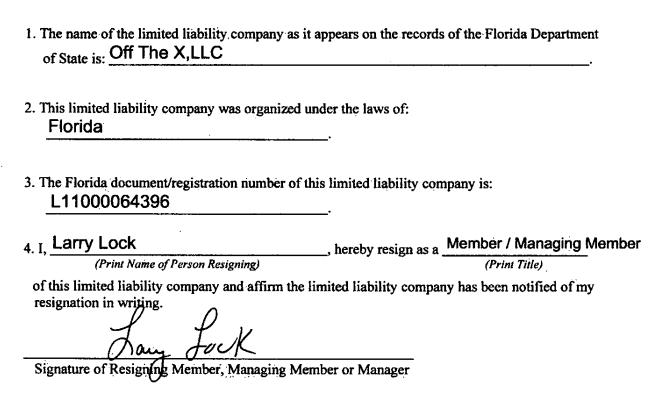
TO: Registration Section Division of Corporations					TALLANS
SUBJECT: Off The X, LLC	***	·		·	r
(Na	me of Limited Lie	ibility Comp	any)		Г
The enclosed member, managing m filing.	ember or mana	ger resigna	ation and fee(	s) are subi	nitted f
Please return all correspondence co	ncerning this m	atter to:			• .
Chris Gately		· .			
(Contact Person)			,		
Off The X, LLC					·
(Firm/Company)	100 May 100 Ma				, , , ;
12117 Panama City Beacl	n Parkway				
(Address)					
Panama City Beach, Florid	17.5	·			
(City/State and Zip C	ode)				,
For further information concerning	this matter, ple	ase call:			
Chris Gately	ot (	850	708-1247		
(Name of Contact Person)			Daytime Tele	<del></del>	ıber)
Enclosed please find a check made   \$25 Filing Fee	payable to the l		partment of S 5 Filing Fee & Certified Co	<b>ይ</b>	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		R D P	AAILING A egistration S division of Co O. Box 6327 allahassee, F	ection orporations	
Tallahassee, Florida 32301					

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY



CR2E079 (5/06)

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)