

(Requestor's Name)				
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	, Certificates	s of Status		
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G. MCLEOD

SEP - 7 2011

EXAMINER



000211705840

09/06/11--01022--010 **25.00

II SEP -6 MILES
SECRETARY OF STATEMENT ANALYSES

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: OZ PARTNERS	
(N:	ame of Limited Liability Company)
The enclosed member, managing managing managing managing.	nember or manager resignation and fee(s) are submitted for
Please return all correspondence co	incerning this matter to:
TANYA KANTENWEIN	
(Contact Person)	
MANATEE CONSULTING	FINC
(Firm/Company)	
3820 COLONIAL BLVD S	TE 101
(Address)	
FORT MYERS FL 33966	
(City/State and Zip C	Code)
For further information concerning	this matter, please call:
TANYA KANTENWEIN	at (239) 4045550
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made \$\sum{7}\$\$ \$25 Filing Fee	payable to the Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as it a	appears on the records of the Flori	ida Department
2. This limited liab	oility company was organized ur	nder the laws of:	
3. The Florida doc L1100006	ument/registration number of th	is limited liability company is:	
·	E CONSULTING INC	, hereby resign as a MGRM (Prin	t Title)
resignation in wr	igned	mited liability company has been ANAIFE CONSULTING aber or Manager	notified of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		ETARY OF STARSSEE, FLO