

L11000083793

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

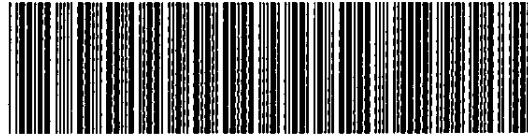
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

FFS



300214031803

11/10/11--01009--028 \*\*85.00

FILED

2011 NOV 10 AM 11:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CLINE

NOV 15 2011

EXAMINER

# DELL GRAHAM

JOHN D. JOPLING\* CARL B. SCHWARTZ† ELLEN R. GERSHOW‡ DALE J. PALESCHIC JENNIFER C. LESTER\* DAVID M. DELANEY SUSAN M. SEIGLE MARK S. THOMAS\*\*

KEVIN A. MCNEILL ANDREW A. MOREY MICHAEL D. PIERCE JENNIFER E. JONES MONIQUE S. CARDENAS

November 8, 2011

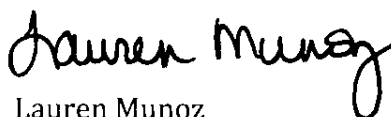
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Re: Resignation of Robert Bitters

Dear Amendment Section:

Enclosed please find three sets of resignation documents. They are resignations for Florida Hearing Specialists, LLC; Advanced Hearing & Audiology, Inc.; and HEAR2HELP, LLC. Also enclosed is a check made out to the Florida Department of State in the amount of \$85.00 which represents the filing fee for the above-referenced resignations. If you require any additional information, please do not hesitate to contact me.

Sincerely yours,



Lauren Munoz  
Paralegal to Mark S. Thomas

FILED  
2011 NOV 10 AM 11:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

rlm  
Enclosures

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Florida Hearing Specialists, 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:

Mark S. Thomas

(Contact Person)

Dell Graham, P.A.

(Firm/Company)

203 NE 1st Street

(Address)

Gainesville, FL 32601

(City/State and Zip Code)

For further information concerning this matter, please call:

Mark S. Thomas

(Name of Contact Person)

at ( 352 ) 372-4381

(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

FILED  
2011 NOV 10 AM 11:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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: Florida Hearing Specialists, 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:  
L11000083793

4. I, Robert Bitters, hereby resign as a MGR  
*(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 NOV 10 AM 11:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA