11000141257

(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:	
/AUG 1 4 2013 L. SELLERS	

Office Use Only



400250171834

08/12/13--01051--005 **55.00

IS AUG I & AM 10: 07

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: FOUNDRY SOUTH, 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:

JAMES PETRAKIS

(Contact Person)

FOUNDRY SOUTH, LLC

(Firm/Company)

1664 BARCELONA WAY

(Address)

WINTER PARK, FL 32789

(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES PETRAKIS

_{at} 407

342-9784

(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

CR2E079 (5/06)



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 a of State is: FOUNDRY SOUTH, LLC	ppears on the records of the Florida Department
2. This limited liability company was organized un FLORIDA	der the laws of:
3. The Florida document/registration number of this L11000144259	s limited liability company is:
4. I. JULIE A PETRAKIS	_, hereby resign as a MGRM
(Print Name of Person Resigning)	(Print Title)
of this limited liability company and affirm the linguistion in writing.	mited liability company has been notified of my
Signature of Resigning Member, Managing Mem	Dar or Manager

Filing Fee:

\$25.00 (Required)

Certified Copy:

\$30.00 (Optional)

TALLED

13 AUG 12 AM 10: 07

SECRETARY OF STATE
AND AMASSEE FLORIDA