## 1200014881

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
. (Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

G. MCLEOD

JUN 12 2012

**EXAMINER** 



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12 JUN I PH 4: II

## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SURI	rECT: Age Old Real Estate L	.LC
50150		nited Liability Company)
The e		r manager resignation and fee(s) are submitted for
Please	e return all correspondence concerning	g this matter to:
Mar	c Schoen	
	(Contact Person)	
Age	Old Real Estate LLC	
	(Firm/Company)	<del></del>
284	Akron Road	
	(Address)	
Lak	e Worth 33467	
	(City/State and Zip Code)	
For fi	urther information concerning this mat	ter, please call:
Mar	c Schoen	at ( 561 ) 267-4397
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclo	·	to the Florida Department of State for:
	<b>✓</b> \$25 Filing Fee	\$55 Filing Fee & Certified Copy
	EET/COURIER ADDRESS:	MAILING ADDRESS:
	stration Section ion of Corporations	Registration Section Division of Corporations
	on Building	P.O. Box 6327
2661	Executive Center Circle hassee, 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 Old Real Estate LLC	• •	the Florida Departmen	ıt	
2. This limited liab	lity company was organized	under the laws of:			
3. The Florida docu L12000064	ment/registration number of	this limited liability compa	ny is:		
4. I, Ken Mione (Print Name of Person Resigning)		, hereby resign as a _m	, hereby resign as a member/partner (Print Title)		
·	oility company and affirm th			y	
Ken M	Tione		SECRETA	· water	
Signature of Resi	gning Member, Managing M	fember or Manager	HY SSE	al Cinum	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		PM 4: I. Of Stat E. Florii	T)	