L12000066443

(Re	equestor's Name)				
(Ad	ldress)				
(Ad	ldress)				
(Cit	ty/State/Zip/Phone	= #)			
PICK-UP	WAIT	MAIL			
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J. SAULSBERRY EXAMINER

JAN 08 2013

COVER LETTER

TO: Registration Section

CR2E079 (5/06)

Divis	sion of Corporations				
SUBJECT:	Romans 1513, LLC				
SOBSECT.	(Name of	Limited Liability Co.	mpany)		
The enclosed filing.	d member, managing member	r or manager resig	gnation and fee(s) ar	e submitted	for
Please return	all correspondence concerni	ing this matter to:			
Jennifer Te	eague				
	(Contact Person)		<u>. </u>		
Romans 15	513, LLC				
	(Firm/Company)	42	_	Zico '	20
2791 Berkf	ford Clr			NA STATE OF THE ST	7013 JAN -2
	(Address)			SSS	-2
Lakeland, I	FL 33810				PH 92
	(City/State and Zip Code)			ORIO ORIO	=
For further is	nformation concerning this m	natter, please call:	:	>	_
Jennifer Te	eague	863 at (660-1349		
(1)	Name of Contact Person)		e & Daytime Telephor	ne Number)	
Enclosed ple	ease find a check made payab \$25 Filing Fee		Department of State \$55 Filing Fee & Certified Copy	for:	
	OURIER ADDRESS:		MAILING ADDI		
Registration		Registration Section			
	Corporations	Division of Corporations P.O. Box 6327			
Clifton Build	aing tive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314			
			i alialiassee, fiorio	1a J4J14	
i allahassee,	Florida 32301				



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 of State is:	s on the records of t	the Florida D	epartm	ent
2.	This limited liability company was organized under the Florida	e laws of:	SECHLIARY (TALL'ALM'SSEF	2013 JAN -2 1	TIT
3.	The Florida document/registration number of this limit L12000066443	ted liability compar	ny is:	PM 89 10	
4.	Nathan Teague . her	eby resign as a	Managing Member		
••	(Print Name of Person Resigning)		(Print Title	=)	
	of this limited liability company and affirm the limited resignation in writing. Signature of Resigning Member, Managing Member or		as been notii	ied of	my

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)