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B. KOHR

DEC-3 2012

EXAMINER

## **COVER LETTER**

TO: Registration Section	
Division of Corporations	myst le
SUBJECT: The Canzons (Name of Limited )	iability Company)
The enclosed member, managing member or manafiling.	ager resignation and fee(s) are submitted for
Please return all correspondence concerning this n	natter to:
(Contact Person)	
(Firm/Company)	sup LLC
4012 Szble Loop (Address)	Diese
City/State and Zip Code)	lovida 33859
For further information concerning this matter, ple	ease call:
	863) 949- 414と Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	Florida Department of State for:  ☐ \$55 Filing Fee &  Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	

CR2E079 (5/06)





## TALLAHASSEE, FLORIDA

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

	nited liability company as it a		
2. This limited liabilit	y company was organized un De pl. of Slate	der the laws of:	Corporations
3. The Florida docum	ent/registration number of th	is limited liability comp	oany is:
12000	3105317	<del></del> •	
4. I, (Print Nam	e of Person Resigning)	, hereby resign as a _	MEINDEUT (Print Title)
of this limited liabil resignation in writir	ity company and affirm the ling.	mited liability company	has been notified of my
Signature of Resign	ing Member, Managing Men	nber or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		

CR2E079 (5/06)