## 1300060860

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(Address)
(133,333)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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JUN 17 2013 D. BUTLER

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: CWES XV, LLC (Name of Limit	ed Liability Co	ompany)	-
The enclosed member, managing member or a filing.	manager resi	gnation and fee(s) are submitted	l for
Please return all correspondence concerning the	nis matter to	:	
Douglas J Weiland		<u>j.</u> .	
(Contact Person)	•		<b>3</b> <u>⊢</u>
JES Properties, Inc.		17.45 17.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45 18.45	3 JUN 14
(Firm/Company)			7.00
3273 Landmark Drive		——————————————————————————————————————	PM 4: 33
(Address)			w
Clearwater, FL 33761			
(City/State and Zip Code)		_	
For further information concerning this matter,	, please call:		
Douglas J Weiland	727	787-6330	
(Name of Contact Person)		& Daytime Telephone Number)	
Enclosed please find a check made payable to t  \$25 Filing Fee		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 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

	<u> </u>	끖	
1. The name of the limited liability company as it appears on the records of the Florid	a Depar	un <u>c</u> nt	٠.
of State is: CWES XV, LLC	- <del>}</del>		est the
	141 * * 141 * * 151 * *	## ##	} *** -
This limited liability company was organized under the laws of:  Florida	FLORIDA	PH 4: 33	Section 1
3. The Florida document/registration number of this limited liability company is:  46-2621973 13600060560.			
4. I, Ruce Weiland, hereby resign as a Manager (Print Name of Person Resigning), hereby resign as a Manager (Print I	Tile)	enk	Y (
of this limited liability company and affirm the limited liability company has been no resignation in writing.	otified of	fmy	
Signature of Resigning Member, Managing Member or Manager			

Filing Fee: Certified Copy: \$25.00 (Required) \$30.00 (Optional)