## 1300119906

(Requestor's Name)				
(Address)				
( accept				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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AND ANASSEE, FLORIDA

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## **COVER LETTER**

~	stration Section sion of Corporations			
SUBJECT:	CSF LAND ACQUISITION, L	.LC		
oemoner.	(Name of Limited Liability Company)			
The enclose	d member, resignation or dissocia	ation and fee(s	are submitted for filing.	
Please return	n all correspondence concerning t	this matter to:		
COLBY FO	ΣX			
	(Contact Person)		-	
CSF LAND	ACQUISITION, LLC			
	(Firm/Company)	_	-	
1701 N 14	TH STREET SUITE B			
	(Address)		-	
TAMPA, F	L 33605			
	(City/State and Zip Code)		-	
For further i	information concerning this matte	er, please call:		
COLBY FO	ОХ	813 at (	699-4250	
(1	Name of Contact Person)		& 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				
Registration Division of Clifton Buil 2661 Execu	Corporations		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

CR2E079 (2/14)





## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

	limited liability company as it LAND ACQUISITION, LLC	appears on the records of the Florida Department
2. The Florida docu L13000119906		igned to this limited liability company is:
3. The date this me	mber/manager withdrew/resig	aned or will withdraw/resign is:
DEVEDLY C	MOAK	, hereby withdraw/resign as a
(Print N	ame of Person Resigning)	
CFO AND AU	THORIZED REP	
	(Print Title)	
resignation in wr		limited liability company has been notified of my
0	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	