L13000/62827

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C. LEWIS MAY 13 2014 EXAMINER

COVER LETTER

SUBJECT: PATTERSONS HOMES LLC
(Name of Limited Liability Company)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Mark R Patt 1150N (Contact Person)
Pattersons homes (Firm/Company)
14 Sally LN (Address)
Santa Rosa Beach FL 32459 (City/State and Zip Code)
For further information concerning this matter, please call:
Mark & Patterson at (850) 375-6440
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

STREET/COURIER ADDRESS:

Registration Section

Division of Corporations

TO:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

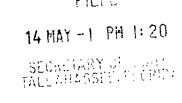
□ \$55 Filing Fee & Certified Copy

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)

\$25 Filing Fee





"Arrille.

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)

	e limited liability company as it appears on the records of the Florida Department
2. The Florida doc	ument/registration number assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is: $\frac{4-22-14}{2}$
Mark D Datt	
(Print) MGR	Name of Person Resigning)
	(Print Title)
of this limited lia resignation in w	ability company and affirm the limited liability company has been notified of my riting.
Mark R	Palleran
Signature of D	issociating Member or Resigning Manager
_	\$25.00 (Required) \$30.00 (Optional)
Connica Copy.	φουνο (Ορασια)