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K.SALY EXAMINER FEB 1 0 2014

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Blue Star Concierge, 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:

Gail Robinson

(Contact Person)

Blue Star Concierge

(Firm/Company)

5940 Todd St

(Address)

Bradenton, Florida 34207

(City/State and Zip Code)

For further information concerning this matter, please call:

Gail L. Robinson

(Name of Contact Person)

at (Mrea Code & 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

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

CR2E079 (12/13)

SUNCOAST 941-755-2690

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FILED 2014 FEB -3 PM 3: 35 SECRETARY OF STATE FALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it of State is: Blue Star Concierge L.LC	appears on the records of the Florida Department
2. The Florida document/registration number of the L13000171658	nis limited liability company is:
3. The date this member withdrew or will withdra 4.1. Ursula P. Stemm	,
(Print Fame of Person Resigning)	, hereby resign as a Vice President / MGRM
of this limited liability company and affirm the l resignation in writing.	imited liability company has been notified of my
Uppula Stem	
Signature of Resigning or Dissociating Management	ger. Member

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)