Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H140000864093)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6393

From:

Account Name : BURGESS, HARRELL, MANCUSO, OLSON & COLTON,

Account Number : I20000000104 : (941)366-3700 Phone

Fax Number : (941)366-0189

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Emmil Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BLUE SKY 31, LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$25.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

B. dostick

APR 1 1 2014

EXAMINER



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

| I. The name of sof State is: | the limited liability company as ILUE SKY 31, LLC | it appears on the records of the Florida Departmen |
|---|--|---|
| 2. The Florida d | | f this limited liability company is: |
| 3. The date this | member withdrew or will with | kraw is: February 13, 2014 |
| | | hereby resign as a MANAGER |
| | nt Name of Person Resigning) | (Prim Title) |
| of this limited resignation in | | e limited liability company has been notified of my |
| The second se | ~ | net • • • |
| Signature of | Resigning or Dissociating Man | nager, Member |
| Filing Fee: | \$25.00 (Required) | |

CR2E079 (12/13)

Certified Copy:

\$30.00 (Optional)