L140000004294

| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| [] |
| Special Instructions to Filing Officer: |
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Office Use Only



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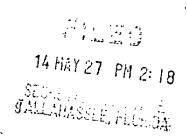
COVER LETTER

| TO: Registration Section Division of Corporations | |
|---|---|
| SUBJECT: CAMPERS | CHOICE |
| (Name of Limite | ed Liability Company) |
| The enclosed member, resignation or dissociate | ion and fee(s) are submitted for filing. |
| Please return all correspondence concerning th | is matter to: |
| Douglas H. Welser (Contact Person) | (GEN PTR) |
| Campers Choice (Firm/Company) | |
| 2923 FruitWood Lane (Address) | |
| Tacksonuille, PL 322 (City/State and Zip Code) | -77 |
| For further information concerning this matter | , please call: |
| Douglas Welser Gen Ptr (Name of Contact Person) | at (<u>904</u>) <u>742-5874</u> (Area Code & Daytime Telephone Number) |
| Enclosed please find a check made payable to \$25 Filing Fee | the Florida Department of State for: \$\square\$\$ \$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 (2/14)







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

(Pursuant to 605.0216, Florida Statutes)

| 1. The name of the lin | nited liability company as it appears on the records of the Florida Department |
|--------------------------------|--|
| of State is: | CAMPERS CHOICE |
| 2. The Florida docum | ent/registration number assigned to this limited liability company is: |
| | 885379 |
| 3. The date this memb | per/manager withdrew/resigned or will withdraw/resign is: 5/21/14 |
| 4. I, KARL A | e of Person Resigning), hereby withdraw/resign as a |
| <u> CO-Ou</u> | INER int Title) |
| of this limited liabilities | ity company and affirm the limited liability company has been notified of my ng. |
| Kart | Hay? |
| Signature of Disso | ociating Member or Resigning Manager |
| Filing Fee: Certified Copy: | , <u> </u> |