## L2000 242 385

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
•	•	•
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Nar	ne)
(Do	cument Number)	<u>.</u>
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
<u> </u>		

Office Use Only



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## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Tegrity Acres 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:	
Nicholas Faul (Contact Person)	
Tegrity Acres, LLC (Firm/Company)	
2960 SE Winque Pin St. (Address)	
Lee, F1 32059 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Samantha Faul at (937) 710 1883.  (Name of Contact Person) (Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida Department of State for:  \$25 Filing Fee \$\sum \\$55 Filing Fee & Certified Copy	
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E079 (2/14)

Tallahassee, FL 32314



## 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)

1. The name of the l	imited liability company as it appears on the records of the Florida Department
of State is:	egrity Acres, LLC
2. The Florida docui	ment/registration number assigned to this limited liability company is:
L200002	42385
3. The date this men	nber/manager withdrew/resigned or will withdraw/resign is: Jan 1,202
	me of Person Resigning), hereby withdraw/resign as a
Manag	Paint Title)
of this limited liab resignation in writ	ility company and affirm the limited liability company has been notified of my ing.
Signature of Dis	sociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)