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(Re	equestor's Name)	
	ddress)	
(770	Jule 33)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
/IRI	usiness Entity Nam	nel
, uc	Jamesa Entity (Val)	ne)
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

•	stration Section sion of Corporations		
SUBJECT:	Bannerman Commons Homes, LLC		
	(Name of Li	mited Liability Con	npany)
The enclosed	d member, resignation or disso	ciation and fee(s	s) are submitted for filing.
Please return	all correspondence concernin	g this matter to:	
Martin Shipma	n		
	(Contact Person)		-
Summit Group	Management, LLC		
	(Firm/Company)		_
3427 Bannerm	an Road, Suite 208D		
	(Address)		_
Tallahassee, Fl	lorida, 32312		
	(City/State and Zip Code)		_
For further in	nformation concerning this ma	tter, please call:	
Martin Shipma	n	850 at (491-3292
(N	lame of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed ple	ease find a check made payable	to the Florida D	Department of State for:
□ \$25 Filing			Fee & Certified Copy
	ng Address:		Street Address:
_	stration Section		Registration Section
	sion of Corporations		Division of Corporations
	Box 6327		The Centre of Tallahassee
Tallahassee, FL 32314	massee, FL 32314		2415 N. Monroe Street, Suite 810
			Tallahassee, FL 32303

CR2E079 (2/14)



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)

	Elimited liability company as it appears on the records of the Florida Department NERMAN COMMONS HOMES, LLC
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:
David W. Dowd	
Manager	
	(Print Title)
of this limited lia resignation in w	ibility company and affirm the limited liability company has been notified of my riting.
Signature of D	issociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)