# L9900001528

(Req	uestor's Name)			
(Add	ress)			
(Address)				
(City/State/Zip/Phone #)				
☐ PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to F	iling Officer:			
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SECRETARY OF STATE
AND A SECRETARY OF STATE
A SECRETARY OF STA

C. LEWIS FEB 1 4 2012 EXAMINER

#### STEPHEN A. HOULD

Attorney at Law. P.A.

920 Third Street, Suite D Neptune Beach, Florida 32266 E-Mail: lawhould@yahoo.com

Telephone: (904) 247-1305

Facsimile: (904) 247-0295

February 9, 2012

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

Re:

Resignation of Managing Member

CEB, LC, Document #L099000001528

To Whom It May Concern:

Enclosed please find the Cover Letter, original executed Resignation of Managing Member, and my firm's check in the amount of \$25.00 for the filing fee.

As always, if you have any questions regarding this, please do not hesitate to contact me.

Very truly yours,

Stephen A. Hould

SAH/cah Enclosures

#### **COVER LETTER**

TO: Registration Section				
Division of Corporations				
SUBJECT: CEB, LC				
(Name of Limited Lial	pility Company)			
The enclosed member, managing member or managiling.	ger resignation and fee(s) are submitted for			
Please return all correspondence concerning this ma	atter to:			
Stephen A. Hould				
(Contact Person)				
Stephen A. Hould, Attorney at Law, P.	Δ			
(Firm/Company)				
V				
920 Third Street, Suite D				
(Address)	<del></del>			
Neptune Beach, FL 32266				
(City/State and Zip Code)				
For further information concerning this matter, plea	se call:			
Stephen A. Hould	904 <sub>)</sub> 247-1305			
(Name of Contact Person) (Ar	ea Code & Daytime Telephone Number)			
Francisco de al como Conde e abrahamanda manabla da dha F	lavida Danastmant of State for			
Enclosed please find a check made payable to the F	\$55 Filing Fee &			
▼ \$25 Fining Fee	Certified Copy			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle	Tallahassee, Florida 32314			
Tallahassee, Florida 32301				

CR2E079 (5/06)





### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the of State is: CEI	limited liability company as i B, LC	t appears on the record	s of the Florida Department
2. This limited liab	lity company was organized	under the laws of:	
3. The Florida docu L 9900000	ment/registration number of 01528	this limited liability cou	npany is:
4. I, K. Dawn B	lackledge ame of Person Resigning)	, hereby resign as a	Managing Member (Print Title)
resignation in wri	pility company and affirm the ting.  gning Member, Managing Me		ny has been notified of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		