

L99000004522

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

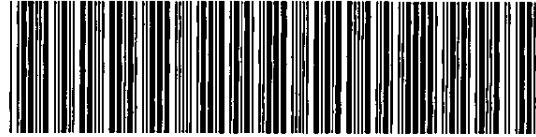
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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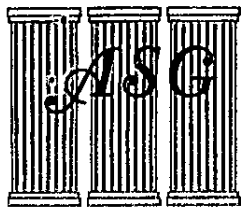
11/14/08--01008--022 **25.00

SECRETARY OF STATE
TREASURY DIVISION

08 NOV 14 PM 3:15

FILED

S. HAWKES
11/17/2008
EXAMINER



ANCHORS ♦ SMITH ♦ GRIMSLEY

A PROFESSIONAL LIMITED COMPANY

ATTORNEYS AND COUNSELORS AT LAW

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ZACHARY A. VANDYKE*

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MATTHEW L. GAETZ

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LAWRENCE KEEFE

JAMIE M. AVERY

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DREW S. PINKERTON**

TIMOTHY W. SHAW

JON C. MOYLE, JR.

VICKI GORDON KAUFMAN

WALTER J. SMITH
1929-2001

** CERTIFIED CRIMINAL TRIAL
LAWYER BY THE FLORIDA BAR
BOARD OF CERTIFICATION

November 12, 2008

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

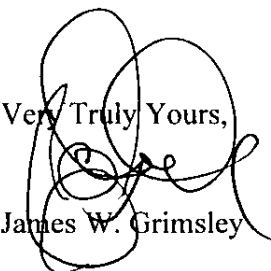
Re: The Swamp, LLC, a Florida Limited Liability Company, resignation of Hubert Alan Laird.

Dear Sir/Madam:

Enclosed please find:

1. Cover letter for The Swamp, LLC, a Florida Limited Liability Company consisting of (1) one page.
2. The signed Resignation of Member Hubert Alan Laird, a Managing Member or Manager from Florida or Foreign Limited Liability Company, consisting of (1) page.
3. Check number 11183 in the amount of \$25.00 payable to Florida Department of State, representing the fee to amend The Swamp, LLC, a Florida Limited Liability Company.

I am,

Very Truly Yours,

James W. Grimsley

JWG/th

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Swamp, LLC, a Florida Limited Liability Company
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

James W. Grimsley, Esquire

(Contact Person)

Anchors Smith Grimsley

(Firm/Company)

909 Mar Walt Drive Suite 1014

(Address)

Fort Walton Beach, Florida 32547

(City/State and Zip Code)

For further information concerning this matter, please call:

Karie Marshall

(Name of Contact Person)

at (850) 863-4064
(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☐ \$25 Filing Fee

☐ \$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

FILED
08 NOV 14 PM 3:15
TALLAHASSEE, FLORIDA
SECRETARY OF STATE



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 limited liability company as it appears on the records of the Florida Department of State is: The Swamp, LLC

2. This limited liability company was organized under the laws of:
Florida

3. The Florida document/registration number of this limited liability company is:
L99000004522

4. I, Hubert Alan Laird, hereby resign as a Managing Member
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.


Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)