## M060000003946

·
(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
·
(Document Number)
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SECRETARY OF STATE DIVISION OF CORPORATION 28 AM 11: 2

T. HAMPTON

JAN 2 9 2009

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Midtown Centre, LLC (Name of Limited)	Liability Company)
The enclosed member, managing member or mafiling.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning this	s matter to:
Roger W. Kellogg	
(Contact Person)	
Kellogg Development Compar	ny
(Firm/Company)	
5500 Executive Center Drive,	#110
(Address)	····
Charlotte, NC 28212	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
Kevin Jensen at	704 817-5275
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the	ne Florida Department of State for:
\$25 Filing Fee	\$55 Filing Fee &
_	Certified Copy
STREET/COURIER ADDRESS:	<b>MAILING ADDRESS:</b>
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
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## 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:	limited liability company as i	t appears on the records of the	ne Florida Department
2. This limited liab	oility company was organized	under the laws of:	
3. The Florida doc M060000	ument/registration number of	this limited liability compan	y is:
	Centre II, LLC	, hereby resign as a Ma	anager
of this limited lia resignation in wi		OF MIDTOWN CENT,	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		DIVISION  09 JAN