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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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09/25/09--01008--009 **25.00

Substance of the contractor

NAMES OF STATE OF STATE OF CORPORATION

T. HAMPTON
SEP 8 8 2009
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Halcyon Consulting and Investments, LLC (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:					
Jeffrey L. Hale (Contact Person)					
Halcyon Consulting and Investments, LLC (Firm/Company)					
1709 A Gornto Rd. # 333					
Valdosta, GA 3160 (City/State and Zip Code)					
For further information concerning this matter, please call:					
Teffrey L. Hale at (229) 4/2-3024 (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 \$\square\$ \$55 Filing 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					
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301					

CR2E079 (5/06)



September 22, 2009

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

Dear Division of Corporations:

I am enclosing the following forms and associated filing fees for my company.

Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company

Resignation of Member, Managing Member or Manager from Florida or Foreign Limited Liability Company (for Willie Wade)

Resignation of Member, Managing Member or Manager from Florida or Foreign Limited Liability Company (for Mary Cangelosi)

Application by Foreign Limited Liability Company to File Amendment to Application for Authorization to Transact Business in Florida

Please call me if you need any additional information.

Sincerely,

Jeffrey L. Hale

CentreMarc Consulting and Investments, LLC

1709A Gornto Rd #333

Valdosta, GA 31601

229-247-2102 Office

229-247-2112 Fax

229-412-3024 Cell



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 a leyon Consultion	it appears on the records	of the Florida Department nen/s, LLC
2. This limited liab	ility company was organized	under the laws of:	
3. The Florida doct	ument/registration number of	this limited liability com	npany is:
4. I, Mary (angelosi ame of Person Resigning)	, hereby resign as a	Member (Print Title)
of this limited lia resignation in wr	bility company and affirm the iting.	e limited liability compar	ny has been notified of my
Signature of Res	M Canyelos ? gning Member, Managing M	lember or Manager	OS SEP
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		25 A