

L02000018296

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

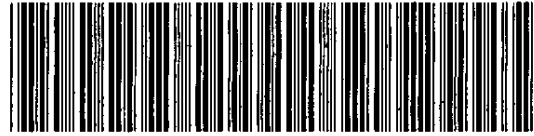
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
08 JUN -9 PM 1:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON
JUN 10 2008
EXAMINER



June 6, 2008

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: 915, LLC

To Whom It May Concern:

Enclosed is a Resignation of Siobhan Wilson-Greene for the above-referenced company. Please file the same—enclosed is the filing fee of \$25.00. Thank you for your time and attention.

Sincerely,

A handwritten signature in black ink, appearing to read 'Madonia Pasker', with a stylized flourish at the end.

Madonia Pasker
Legal & Title Assistant
Enclosures as Stated

c: client



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: 915, 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:
L02000018296

4. I, SIOBHAN WILSON-GREENE, hereby resign as a MANAGER/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.


SIOBHAN WILSON-GREENE

Signature of Resigning Member, Managing Member or Manager

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

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TALLAHASSEE, FLORIDA

DIRECTOR AND MANAGER RESIGNATION
of
915, LLC

I, **SIOBHAN WILSON-GREENE**, hereby submit my resignation as Manager and/or Managing member of **915, LLC**, a Florida Limited Liability Company, effective upon signature hereof.

DATED this 18th day of April, 2008.



SIOBHAN WILSON-GREENE

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TALLAHASSEE, FLORIDA