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T. CLINE
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EXAMINER

COVER LETTER

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2661 Executive Center Circle

Tallahassee, Florida 32301

CR2E079 (5/06)

TO: Registration Section Division of Corporations The enclosed member, managing member or manager resignation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: For further information concerning this matter, please call: at (239) 236-0568 29 (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 **MAILING ADDRESS:** STREET/COURIER ADDRESS: Registration Section Registration Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building

Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

_	limited liability company a	is it appears on the records of the Flo	orida Department	
2. This limited liab	ility company was organize	ed under the laws of:	2008 SE TAL	
4. I, Ranson (Print N of this limited lial resignation in wr	DOO3868 DECO Jame of Person Resigning) bility company and affirm the	he limited liability company has bee	2008 HAR 17 PM 1: 34mm SECRETARY OF STATES TALLAHASSEE. FLORIDE TALLAHASSEE. FLORIDE In noting in noting	すこでで
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			