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SECRETARY OF STATE
DIVISION OF CORPORATION

G. MCLEOD

APR 3 0 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Primar 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:
Winnie Marchisello-Pritchett (Contact Person)
Primar LLC (Firm/Company)
259 Buttonwood Drive (Address)
Key Biscayne, FL 33149 (City/State and Zip/Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (305) 588 2816 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 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

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	mited liability company as it a Primar LLC		of the Florida Dep	partn	nent —·
	ity company was organized un				
3. The Florida docum	nent/registration number of thi	s limited liability comp	pany is:		
4.1, John	MATChisello me of Person Resigning)	_, hereby resign as a _	Managly (Prini Title)	m	<u>erbu</u>
of this limited liabi resignation in writi	lity company and affirm the liing.	mited liability company	y has been notifie	d of	my
	ning Member, Managing Mem	nber or Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			08 APR 28	SECRETAR DIVISION OF
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