L07000716

(Re	equestor's Name)	
(Ac	ldress)	
— (Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

G. MCLEOD

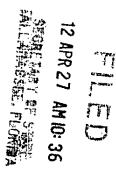
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EXAMINER



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COVER LETTER

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er resignation and fcc(s) are submitted fo
itter to:
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se call:
561 , 262-7918
ca Code & Daytime Telephone Number)
lorida Department of State for:
S55 Filing Fee &
Certified Copy
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

1. The name of the limited liability company as it apports of State is: MARSHALL FIREARMS, LI	
This limited liability company was organized undo Florida	er the laws of:
3. The Florida document/registration number of this LO7000071669	limited liability company is:
4. I. LISA LAPLUME (Print Name of Person Resigning)	hereby resign as a MGRM (Print Title)
of this limited liability company and affirm the limit resignation in writing.	·
Signature of Resigning Member. Managing Member	er or Manager
Filing Fee: \$25.00 (Required)	12 A

CR2E079 (5/06)

Certified Copy: \$30.00 (Optional)