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TO: Registration Section

Division of Corporations	
SUBJECT: Gaudet Family L. (Name of Limited Liability Com	pany)
The enclosed member, managing member or manager resignfiling.	nation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
Joseph Gaydet III (Contact Person)	en <u>al</u>
Gaudet (Firm/Company)	
3021 Jupiter Park Circ	le #101
Jupiter FL 33458 (City/State and Zip Code)	to sa
For further information concerning this matter, please call:	
Joseph Coudet at (561 (Name of Contact Person) (Area Code of	2 748 - 3040 & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida D \$25 Filing Fee \$35	epartment of State for: 55 Filing Fee & Certified Copy
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CR2E079 (5/06)	



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 audet Fam	is it appears on the records of	of the Florida Depar	rtment
2. This limited liab	ility company was organize		:	
3. The Florida docu		of this limited liability comp	oany is:	
	ame of Person Resigning) pility company and affirm t	, hereby resign as a	(Print)Title)	•
Signature of Resi	gning Member, Managing	Member or Manager	0 <i>1</i>	SKOP SWICTO
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			FD 97 PM 2: