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COVER LETTER

Division of Corporations		•
SUBJECT: Njoy Products, LLC		
(Name of Li	mited Liability Co	ompany)
The enclosed member, managing member of filing.	or manager res	ignation and fee(s) are submitted for
Please return all correspondence concernin	g this matter to	:
Brad Thomas		_
(Contact Person)		
Njoy Products, LLC		
(Firm/Company)		
9515 Granite Ridge Lane,		
. (Address)		
West Palm Beach, FL 33411		
(City/State and Zip Code)		
For further information concerning this ma	tter, please cal	l :
Brad Thomas	at (717) 515-0338
(Name of Contact Person)	(Area Cod	le & Daytime Telephone Number)
Enclosed please find a check made payable \$25 Filing Fee	to the Florida	Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:		MAILING ADDRESS:
Registration Section		Registration Section
Division of Corporations		Division of Corporations P.O. Box 6327
Clifton Building 2661 Executive Center Circle		Tallahassee, Florida 32314
Tollahassaa Florida 22201		i ununussee, i minu sesia

CR2E079 (5/06)

TO:

Registration Section



FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

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

	e limited liability company as y Products, LLC	it appears on the records of the F	lorida Department		
2. This limited lial Florida	oility company was organized	l under the laws of:			
3. The Florida doc L080001071	•	f this limited liability company is:	:		
4. I, David Spatz (Print Name of Person Resigning)		, hereby resign as a Membe	_, hereby resign as a Member (Print Title)		
of this limited lia resignation in w Signature of Res	ability company and affirm the riting. Signing Member, Managing N	e limited liability company has be	een notified of my		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		O9 MAR 2		