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(Re	equestor's Name)	
(
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	9#)
PICK-UP	MAIT WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
(50	cument rumber,	
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TALLAHASSEE: FLORIDA

C. LEWIS

MAY - 2 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SUNLAND QUALITY PRODUCTS, LLC (Name of Limited Liability Company)	_
The enclosed member, managing member or manager resignation and fee(s) are submitt filing.	ed for
Please return all correspondence concerning this matter to:	
ROBERT F. FITZGERALD, JA. (Contact Person)	
SUNLAND QUALITY PRODUCTS, LLC (Firm/Company)	
1330 CHARLESSON SQ. DR. #202 (Address)	
NAPLES, FL 34/10 (City/State and Zip Code)	
For further information concerning this matter, please call:	
ROBERT FITZGERALO at (239) 287-8/27 (Name of Contact Person) (Area Code & Daytime Telephone Number	_
(Name of Contact Person) (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	
STREET/COURIER ADDRESS: MAILING ADDRESS:	
Registration Section Registration Section	
Division of Corporations Division of Corporations	
Clifton Building P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32314	
Tallahassee, Florida 32301	

CR2E079 (5/06)



FILED

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SECRETARY OF STATE TALLAHASSEE FLORIDA

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 appears on the records of th	ne Florida Department
of State is: So	INLAND QUALITY PA	OBUCTS, LLC	
-			
2. This limited liab	ility company was organized	under the laws of:	
THE STA	TE OF FLORIDA		
	ument/registration number of	this limited liability company	/ is:
4. I, ROBERT F	. FITZGERALD, JA ame of Person Resigning)	, hereby resign as a MA.	NACING MEMBER (Print Title)
of this limited lia resignation in wr		e limited liability company ha	s been notified of my
Pober	f. Tetzenlef		
Signature of Resi	gning Mernber, Makeging M	ember or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		