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SECRETARY OF STATE TALLAHASSEE. FLORIDA

SEP 2.5 201; J. BUTI ED

## **COVER LETTER**

TO: Registration Section Division of Corporation	ns	
SUBJECT:	FJM Manager	
	(Name of Limited Liability Co.	npany)
The enclosed member, manag filing.	ing member or manager resig	gnation and fee(s) are submitted
Please return all corresponden	ce concerning this matter to:	
P. Todd Kenr	nedy	
(Contact I	Person)	_
The Kennedy	/ Law Firm, P.L	
(Firm/Cor	npany)	_
1675 Palm Beach	n Lakes Blvd. #700	)
(Addres	s)	_
West Palm Be	ach, FL 33401	
(City/State and	I Zip Code)	-
For further information concer	ning this matter, please call:	
P. Todd Kenne	dy <sub>at (</sub> 561	683-2484
(Name of Contact Per	son) (Area Code	& Daytime Telephone Number)
Enclosed please find a check in \$25 Filing Fe	* *	S55 Filing Fee &
		Certified Copy
STREET/COURIER ADDR	ESS:	MAILING ADDRESS:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
Clifton Building 2661 Executive Center Circle		P.O. Box 6327
2001 Executive Center Circle		Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	FJM Management, LLC	pears on the records of the Florida D	×	
2. This limited liab the State of	ility company was organized under Florida	er the laws of:	13 SEP 19	FALLAHAS
3. The Florida doct L120000613	ument/registration number of this 312	limited liability company is:	PH 5: 23	SEE, FLOR
4. I, Ricky Wal	ker	, hereby resign as a Managing Me	ember 3	D'E
(Print N	lame of Person Resigning)	(Print Title	)	
of this limited lia resignation in wr	• •	ited liability company has been notif	ied of my	
Cul	2 Welk			
Signature of Res	ighing Member, Managing Memb	er or Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			