L94000000017

(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section

Division of Corporations		
SUBJECT: Susan Bennett (Name of Limit	ed Liability Company)	Ledia, LC
The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning t	his matter to:	
Sysan Bennett (Contact Person)		JUB SEP 18 SECRETARY TALLAHASSE
Sysan Bennett Marketi (Firm/Company)		SEP 18 P 1: 22 CRETARY OF STATE AND A
3949 Evans Avenue	Hor	22 PATE DRIDA
For t Myers F1 3390 (City/State and Zip Code)) (
For further information concerning this matter	r, please call:	
Susan Bennett (Name of Contact Person)	at (239) 277- 524 (Area Code & Daytime Telep	hone Number)
Enclosed please find a check made payable to \$25 Filing Fee	the Florida Department of St. \$55 Filing Fee & Certified Cop	ate for: y
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING AD Registration Se Division of Cor P.O. Box 6327 Tallahassee, Flo	ction porations
Tallahassee, Florida 32301 CR2E079 (5/06)	Pd. 9/14/08	



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as		
Flo	ility company was organized	<u></u> .	TALLAHASSEE.
	ument/registration number of		OF STA
4. I, Philop (Print N	ame of Person Resigning)	, hereby resign as a <u>U (C</u>	Print Title)
of this limited lial resignation in wri	bility company and affirm the		
	gning Member, Managing M	ember or Manager	
	\$25.00 (Required) \$30.00 (Optional)		