107000048774

| (Requestor's Name) | | | | |
|---|----------------|-------------|--|--|
| (Ac | ldress) | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
| | , | | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only



100104103621

06/14/07--01029--005 **25.00

DIVISION OF CORPORATIONS

COVER LETTER

Tallahassee, Florida 32301

CR2E079 (5/06)

| TO: Registration Section | | |
|--|---|--|
| Division of Corporations | | |
| SUBJECT: Xenon Squared, LLC | · | |
| (Name of Limited L | iability Company) | |
| The enclosed member, managing member or man filing. | ager resignation and fee(s) are submitted for | |
| Please return all correspondence concerning this | matter to: | |
| Adriana L. Kassay | | |
| (Contact Person) | | |
| Xenon Squared, LLC | 07 JUN 14 AH 10: 26 | |
| (Firm/Company) | <u> </u> | |
| 13590 SE 108th Court Rd. | F 22 | |
| (Address) | —————————————————————————————————————— | |
| Ocklawaha, FL 32179 | 26 | |
| (City/State and Zip Code) | | |
| For further information concerning this matter, pl | ease call: | |
| Adriana L. Kassay at (| 352 , 288-1503 | |
| (Name of Contact Person) (| Area Code & Daytime Telephone Number) | |
| Enclosed please find a check made payable to the \$25 Filing Fee | Florida Department of State for: \$55 Filing Fee & | |
| 4 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 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 | |



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

| | imited liability company a | s it appears on the records of | the Florida Department |
|-----------------------------|--|----------------------------------|----------------------------|
| 2. This limited liabil | lity company was organize | ed under the laws of: | 07 JUN 14 AH 10: 26 ny is: |
| 3. The Florida documents | • | of this limited liability compar | ny is: |
| | me of Person Resigning) | he limited liability company b | (Print Title) |
| resignation in writ | ting. | he limited liability company h | ias been nounted of my |
| Filing Fee: Certified Copy: | sming Member, Managing I \$25.00 (Required) \$30.00 (Optional) | viemoer or ivianager . | |