L06000055250

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(Ac	ddress)	
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<u>(Ci</u>	ity/State/Zip/Phone	#\
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PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
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Certified Copies	_ Certificates	or Status
Special Instructions to	Filing Officer:	
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O9 MAR 16 PM 1: 15
SECRETARY OF STATE
TALLAHASSEF FLORIDA

B. KOHR

MAR 1 6 2009

EXAMINER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Walk-In

Will Pick Up

937 Main Street, LLC	OS MAR 16 PM 1: 15
Thank you!	Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File Momber Resignation Fictitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search
Signature	Fictitious Owner Search Vehicle Search
Requested by: Marie 3/6 Am Name Date Time	Driving Record UCC 1 or 3 File UCC 11 Search
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Courier



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 a of State is: 937 Main Street, LLC	ppears on the record	s of the Florida Department
		P. S.
2. This limited liability company was organized und Florida	ler the laws of: 	ASSEE 3
3. The Florida document/registration number of this L06000055250	s limited liability con	npany is:
4. I. Eric Campbell	hereby resign as a	Managing Member
(Print Name of Person Resigning)	<u> </u>	(Print Title)
of this limited liability company and affirm the liming resignation in writing.	nited liability compar	ny has been notified of my
1 harman		
Signature of Resigning Member, Managing Memb	per or Manager	

\$25.00 (Required) \$30.00 (Optional)

Filing Fee: Certified Copy: