Emerald Key, C.C. Q. Requester's Name	0005315
Address Address Mill FL 33133 City/State/Zip Phone #	Ste 1000 MJH 8000041329287 -05/03/0101031011 ******25.00
CORPORATION NAME(S) & DOCUM	Office Use Only ENT NUMBER(S), (if known):
1. <u>CO -53/5</u> (Corporation Name)	(Document #)
2. (Corporation Name)	(Document #)
3(Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
Walk in Pick up time Mail out Will wait NEW FILINGS Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS	Certified Copy Photocopy Certificate of Status AMENDMENTS Amendment Resignation of R.A., Officer/Director F. O. Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other
CR2E031(7/97)	Examiner's Initials



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Mark Meye	5	hereby resig	gn as Marcy Direct (Title)	tor Member
of <u>Emerald</u>	Ken L	LC Liability Company)		•
a limited liability compan	y organized under d liability company	the laws of the State has been notified in	of For Oca writing of the resignat	ion.
	M	M		
(Signatu	re of resigning ma	nager, managing me	mber or member)	

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

CR2E079(10/99)

DI MAY - I PM 5: 02 BECRETARY OF STATE