L02000008447

| | | <u> </u> | | | |
|---|-------------------|-------------|--|--|--|
| (Re | equestor's Name) | | | | |
| (Address) | | | | | |
| (Address) | | | | | |
| (Ci | ty/State/Zip/Phon | ne #) | | | |
| PICK-UP | ∏ WAIT | MAIL | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies | _ Certificate | s of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
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T. HAMPTON
SEP 2 7 2010
EXAMINER

COVER LETTER

| Division of Corporations | |
|--|---|
| SUBJECT: GLOBAL CASH ADVANCI | |
| (Name of Elimed E | additty Company) |
| The enclosed member, managing member or man filing. | ager resignation and fce(s) are submitted for |
| Please return all correspondence concerning this r | matter to: |
| J. WARREN BULLARD | |
| (Contact Person) | |
| (Firm/Company) | |
| 18 NW 3RD AVE. | |
| (Address) | |
| OCALA, FL 34475 | |
| (City/State and Zip Code) | |
| For further information concerning this matter, ple | ease call: |
| J. WARREN BULLARD at (| 352 , 732-5900 |
| (Name of Contact Person) (A | 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 & Certified Copy |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, Florida 32314 |

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

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

| | | s it appears on the records of | the Florida Department |
|----------------------------------|--|----------------------------------|---------------------------------------|
| of State is: GLO | OBAL CASH ADVAN | ICE II, LLC | · · · · · · · · · · · · · · · · · · · |
| | | | |
| 2. This limited liab | ility company was organized | d under the laws of: | |
| 3. The Florida docu L02000008 | _ | of this limited liability compar | ny is: |
| 4. I, JOHN T. N | | , hereby resign as a M | GRM |
| (Print Name of Person Resigning) | | | (Print Title) |
| resignation in wr | | Minber or Manager | nas been notified of my |
| Filing Fec: Certified Copy: | \$25.00 (Required) \$30.00 (Optional) | | 1 |

CR2E079 (5/06)