## -L0200030079

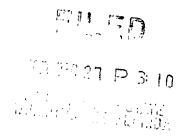
		100 100 27 P
	(Requestor's Name)	
	(Address)	<del></del>
<del></del> _	(Address)	
<del></del> -	(City/State/Zip/Phone	<i>⇒ #</i> )
PICK-UP	WAIT	MAIL
	(Business Entity Nar	ne)
	(Document Number)	
Certified Copies	Certificates	of Status
Special Instructions	to Filing Officer:	
		ALT

Office Use Only



500042996375

12/27/04--01053--016 \*\*250.00



## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, LARRY W. WILLIAMS	, hereby resign as Manager/MGRM/Member	
	(Title)	
of MAUDEHELEN, LLC (L02000030079)	,	
(Limited Liabilit	y Company)	
a limited liability company organized under the law	rs of the State of FLORIDA,	
and affirm that the limited liability company has been notified in writing of the resignation.		
(Signature of resigning manager, n	nanaging member 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