(Requestor's Name)	_
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	_
·	
Special Instructions to Filing Officer:	٦
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Office Use Only



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G. MCLEOD

JAN 23 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: HALL SUBJECT: (Name of Limited I	CSS, LLC Liability Company)
The enclosed member, managing member or marfiling.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
Centhia Graves (Contact Person)	
HAH Express,	LLC
434 SWAngela	Terrace
Lake City/State and 21p Code)	024
For further information concerning this matter, p	lease call:
(Name of Contact Person) at ((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	MAILING ADDRESS: Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



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 li	mited liability company as it appears on the records of the Florida Dep	artme	nt
of State is:	THEXPESSILL		
•	1 - 7		
2. This limited liabili	ty company was organized under the laws of:		
Flori	de.		
3. The Florida docum	nent/registration number of this limited liability company is:		
620	000374911		
<u> </u>	<u> </u>		
4.1. Worthia	Hadley Grangereby resign as a Partho	or	
,	ne of Person Resigning) (Print Title)		
of this limited liabil	ity company and affirm the limited liability company has been notified	d of m	y
resignation in writing	ng.		
//	_ 1		0
Cent	on Marees	80	VSE SE
Signature of Resign	ing Member, Managing Member or Manager	08 JAN	<u>5</u> 33
V		¥ 22	44 [23-7
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Filing Fee:	\$25.00 (Required)		` -
Certified Copy:	\$30.00 (Optional)	-	
		-	