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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: Motor Trike of Daytona, LLC (Name of Limited Liability Company) |
| Dear Sir or Madam: |
| The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing |
| Please return all correspondence concerning this matter to the following: |
| Elizabeth WEIDEMAN (Name of Person) |
| Motor Trike of Daytora LLC (Firm/Company) |
| 384 N. Beach St. (Address) |
| Dactora Beach 7L 32114 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Elizabeth WEIDEMAN at (386) 255-1999 (Name of Person) (Area Code & Daytime Telephone Number) |
| 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 Tallahassee, Florida 32314 |
| Enclosed is a check for the following amount: |
| CR2E079 (8/05) \$\int \frac{1}{2}\$ Filing Fee & Certified Copy |



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

| I, DAN PEREZ, h | ereby resign as <u>MANQCER</u> |
|--|---|
| | (Tifle) |
| of Motor Trike of Daytona | LLC |
| (Limited Liability Co | ompany) |
| a limited liability company organized under the laws or | f the State of 710 rida |
| and affirm that the limited liability company has been t | notified in writing of the resignation. |
| Dan A | |
| (Signature of resigning manager, man | aging 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

CR2E079 (8/05)

DIVISION OF CORPORATIONS

OF AUG 25 PM 1. 1.