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SECRETARY OF STATE ALLAHASSEE, FLORIDA

2001 AUG -3 P 1: 19



COVER LETTER

Division of Corporations			
SUBJECT: Florida Bicycle Sports (Name of Limited	S, LLC d Liability Company)		
The enclosed member, managing member or m filing.	anager resignation and fee(s) are submitted for		
Please return all correspondence concerning this	is matter to:		
Matthew D. Moss	20 S TAI		
(Contact Person)			
Florida Bicycle Sports, LLC	2001 AUG -3 SECRETARY ALLAHASSE		
(Firm/Company)			
2429 Central Avenue	P 1: 19 OF STATE E. FLORIDA		
(Address)	Dri o		
St. Petersburg, Florida			
(City/State and Zip Code)			
For further information concerning this matter,	please call:		
Matt Moss a	, 727 ₎ 823-7775		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable to t \$25 Filing Fee	he Florida Department of State for: \$55 Filing Fee & Certified Copy		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, 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

1. The name of the lin of State is: Flori	nited liability company as it ap	pears on the records	AR A	
2. This limited liabilit	y company was organized und	er the laws of:	ILED 16 -3 P 1: 19 TARY OF STATE HASSEE, FLORIDI	
	ent/registration number of this OO 34609	limited liability com	pany is:	
4. I, Brian A. C	owan	, hereby resign as a	Member and Manager	
	e of Person Resigning)	., , <u>,</u>	(Print Title)	
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing Signature of Resigning Member, Managing Member or Manager				
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			