## 1030000 40998

|   |   | <del></del> |  |
|---|---|-------------|--|
|   | lle Hood<br>tidgewood Ave.<br>a Beach, FL 32114 | 4929        |  |
| (Addre                                  | ss)   |             |  |
| (City/State/Zip/Phone #)                |   |             |  |
| PICK-UP                                 | WAIT  | MAIL        |  |
| (Business Entity Name)                  |   |             |  |
|   |   |             |  |
| (Document Number)                       |   |             |  |
| Certified Copies                        | Certificate                                     | s of Status |  |
| Special Instructions to Filing Officer: |   |             |  |
|   |   |             |  |
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|   |   |             |  |
|   |   | 1010        |  |
|   | Office Lies O                                   | 11171       |  |



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10/18/04--01032--011 \*\*25.00

OH DOT 18 ANIO: 57

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

| I, ROBIN HOOD  | , hereby resign as MANAGER       |  |
|--|----------------------------------|--|
|  | (Title)                          |  |
| of HOOD L.L.C.   | ,                                |  |
| (Limited Liabi   | lity Company)                    |  |
| a limited liability company organized under the la   | iws of the State of FLORIDA,     |  |
| and affirm that the limited liability company has leading to the liability company has le | Josef Service State of the CT 18 |  |

## 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