## L04000011427

(Requestor's Name)				
(Address)				
(Ad	dress)			
70.1		10		
(Cit	y/State/Zip/Phone	: #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				





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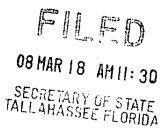
SECRETARY OF STATE
TALLAHASSEE FLORIDA

## **COVER LETTER**

TO:	Registration Section Division of Corporations	
	Division of Corporations	
SUBJ	ECT: Black Sheep Communica	ations Group, LLC
	(Name of Limited	d Liability Company)
The enfiling.	<del>-</del> -	nanager resignation and fee(s) are submitted for
Please	e return all correspondence concerning thi	is matter to:
Dan	nie A. Austin	
	(Contact Person)	
Blac	k Sheep Communications Gro	oup, LLC
	(Firm/Company)	
40 S	South Prospect Drive	
	(Address)	
Cora	al Gables, FL 33133	
	(City/State and Zip Code)	
For fu	orther information concerning this matter,	, please call:
Dan	nie A. Austin	at ( 305 ) 794-0796
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclo	sed please find a check made payable to t	the Florida Department of State for:  \$55 Filing Fee &  Certified Copy
		.,
	EET/COURIER ADDRESS:	MAILING ADDRESS:
_	tration Section	Registration Section Division of Corporations
	ion of Corporations on Building	P.O. Box 6327
	Executive Center Circle	Tallahassee, Florida 32314
	hassee, Florida 32301	Turidiadood, I fortad obo 14

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 limited liability company as it appears on the records of the Florida Department of State is: Black Sheep Communications Group, LLC						
2. This limited liabilited Florida	ty company was organized u	nder the laws of:				
3. The Florida document/registration number of this limited liability company is:  L0400011427						
4. I, Dannie A. Austin  (Print Name of Person Resigning)		, hereby resign as a	Managing Member (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)					

CR2E079 (5/06)