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SEUICE SEE, FLORIDA

SEUI ANASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Twikle UC (Name of Limited Liability Company)		
Dear Sir or Madam:		
The enclosed Resignation of Member, Managing M	lember or Manager and fee(s) are submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
	<u> </u>	
Angua D. Da. I		
(Name of Person)	-	
(Firm/Company)		
3US Commoclare P1.		
(Address)		
ObConut Grove, F 33' (City/State and Zip Code)	133	
For further information concerning this matter, plea	se call:	
Ayara Okoud a (Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee &	
CR2E079 (8/05)	Certified Copy	



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Mark dwry , hereby resign as Manager (Title)	
of Twincle UC (Limited Liability Company)	,
a limited liability company organized under the laws of the State of Ponda	,
and affirm that the limited liability company has been notified in writing of the resignation	1.
Mark Cherry	
(Signature of resigning manager, mapaging member or member)	06 FEB
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FLOR	3: 06 1: AT

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