Division of Corporations Public Access System

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To:

Division of Corporations

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From:

Account Name : GOLDBERG BATES, PLLC

Account Number : I20070000134 Phone : (407)893-3776

Fax Number : (407)893-3779

L. SELLERS

EXAMINER

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

T.I. GROUP INVESTMENTS, LLC

APR-9 PH 1:4

Certificate of Status	0
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Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

CR2E079 (5/06)

COVER LETTER

FO: Registration Section Division of Corporations	
SUBJECT: T.I. Group Investments,	LLC
(Name of Limited	d Liability Company)
The enclosed member, managing member or m filing.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning th	is matter to:
Jodi Jaiman	
(Contact Person)	
Soone Business Development, Inc	<u>. </u>
(Firm/Company)	
3660 Maguire Blvd., Suite 103	
(Address)	
Orlando, FL 32803	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
Rachel Farber a (Name of Contact Person)	1(407) 193-3774
(Name of Contact Person)	(Area Code & Daytimo Telephone Number)
Enclosed plea <u>se f</u> ind a check made payable to t	
\$25 Filing Fee	\$55 Filing Fee &
Literal Visit Control	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
266) Executive Center Circle	Tallahassee, Florida 32314

408000000036 3



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 of State is: T.I.	limited liability company as it Group Investments, LI	appears on the records of	f the Florida Departn	ient •
2. This limited liab	lity company was organized u	nder the laws of:		
3. The Florida docu L.04000036	ment/registration number of the 1206	nis limited liability compa	any is:	
(Print N	echnologies, Inc. ame of Person Resigning) bility company and affirm the l ting.		(Print Title)	— my
Signature of Resi	gring Member, Managing Men	mber or Menager	ent	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	£ -\$	2008 APR -9 A SECRETARY O TALLAHASSEE	
CR2E079 (5/06)			OF ST	O