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Law Offices of

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February 27, 2006

- \* FLORIDA BAR BOARD CERTIFIED-REAL ESTATE
- ^ ALSO LICENSED IN KENTUCKY
- \*\* ALSO LICENSED IN TEXAS
- <sup>1</sup> OF COUNSEL ALSO LICENSED IN CONNECTICUT
- 11 ALSO LICENSED IN NEW YORK
- †FLORIDA BAR BOARD CERTIFIED-WILLS, TRUSTS & ESTATES ALSO LICENSED IN COLORADO AND MICHIGAN
- OF COUNSEL
- \* Also Licensed in Pennsylvania
- \* ALSO LICENSED IN MICHIGAN

File No. 8047-2

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

JUDSON H. BAILEY

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REBECCA J. PROCTOR

BURTON M. ROMANOFF\*

JOHNSON S. SAVARY, JR. \*\*

RYAN A. FEATHERSTONE

RALPH L. FRIEDLAND

RE: Resignation of Member, Managing Member or Manager

To Whom This May Concern:

Attached is a Cover Letter and completed Application for Resignation of Member, Managing Member or Manager that we are filing on behalf of **CAB**, **Limited Liability Company**, along with a check in the amount of \$25.00, payment in full to process this filing.

Thank you in advance for your assistance in this matter. Feel free to contact me by phone or email at <a href="mailto:dwilliams@dunlapmoran.com">dwilliams@dunlapmoran.com</a> if you have any questions regarding this request.

Very truly yours,

Donna M. Williams Legal Assistant

Ma M. Wullams

Enclosures

cc: Monique Joannette

F:\Docs\-RE\8047-2\Binger Buyout\State Dept-Resignation of Member

SARASOTA FORT MYERS

### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: CAB, Limited Liability Compan	у	
(Name of Lin	nited Liability Company)	
Dear Sir or Madam:		
The enclosed Resignation of Member, Managing	g Member or Manager and fee(s) are submitted for filing	
Please return all correspondence concerning this	matter to the following:	
Monique Joannette		
(Name of Person)		
(1)	<u> </u>	
(Firm/Company)		
1950 Alta Vista Street		
(Address)		
Sarasota, FL 34236	A.	
(City/State and Zip Code)		
For further information concerning this matter, p	please call:	
Monique Joannette	at ( 941 ) 924-9415	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Cliffon Building	Division of Corporations	
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee &	
CP3F079 (8/05)	Certified Copy	



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

#### RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Cherie A. Binger	, hereby resign as Manager	
	(Title)	
of CAB, Limited Liability Company	_	
(Limite	d Liability Company)	
a limited liability company organized under	the laws of the State of Florida	
and affirm that the limited liability company	y has been notified in writing of the resignation.	
Min		
(Signature of resigning mag	nager, managing member or member)	

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

SECDER - C MILLIAN