# L04000045103

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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#### TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: THE EZRA PROJECT, LLC (Name of Corporation)			
DOCUMENT NUMBER: LO4ØØØ 451Ø3			
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
MARK JOBE (Name of Person)	SECRE TALLAH	2004 NOV 17	
THE EZKA PROJECT, LLC (Name of Firm/Company)	TARY OF	W 17 [	F
2451 PALMETTO DRIVE (Address)	CRETARY OF STATE LAHASSEE, FLORIDA	H 4 21	Ĭ.
LONG WOOD FL 32779 (City/State and Zip Code)			
For further information concerning this matter, please call:			
MARK JOBE at (321) 663 9393 (Name of Person) (Area Code & Daytime Telephone Number)			

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 4, 2004

MARK JOBE THE EZRA PROJECT, LLC 2451 PALMETTO DRIVE LONGWOOD, FL 32779

SUBJECT: THE EZRA PROJECT, LLC

Ref. Number: L04000045103

We have received your document for THE EZRA PROJECT, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is an LLC. Enclosed is the proper form for your LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 404A00063237

SECRETARY OF STATE

### RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

Greg Garrett, hereby resign as Source Member
of The Fera Project LLC, (Limited Liability Company)
a limited liability company organized under the laws of the State of Tlorida,
and affirm that the limited liability company has been notified in writing of the resignation,
And San Financial State of the San Financial Sta
(Signature of resigning manager, managing member or member)
ψ 21 LORID

## 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