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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Pastal Annex + # (Name of Limited Liability	4009 LLC y Company)
Dear Sir or Madam:	
The enclosed Resignation of Member, Managing Member	or Manager and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Steven C. Mooney	
Postal ANNEX+ #4009, LL	C JUN
4583 St. John's Parkwa	4 7
SANFORD, FL 32771 (City/State and Zip Code)	
For further information concerning this matter, please call:	:
STEVEN G. MOONEY at (4) (Name of Person) at (4)	07, 302-8300 Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
\$25 Filing Fee CR2E079 (8/05)	\$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Alex Camacho, hereby resign as Manager Mana	1eml	<u>0</u> € <
of Postal Annex + #4009, LLC (Title) (Limited Liability Company)		, ,
a limited liability company organized under the laws of the State of FLorida		_,
and affirm that the limited liability company has been notified in writing of the resignation	1.	
(Signature of resigning manager, managing member or member)	06	SIAIU

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