## \* W400052108

(Requestor's Name)	
(Address)  2202 N. West Shore Blvd. Suite 200 Tampa, FL 33607	The same of the sa
(City/State/Zip/Phone #)	<del></del>
PICK-UP WAIT N	AIL.
(Business Entity Name)	
(Document Number)	
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64-52108	
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M. HODGES

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## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I. Mark Capaz	, hereby resign as Manager
-	(Title)
of Capaz LLC	
(L	imited Liability Company)
a limited liability company organized u	nder the laws of the State of Florida
and affirm that the limited liability com	pany has been notified in writing of the resignation.
(Signature of resigning	g manager, 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

CR2E079(11/03)

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