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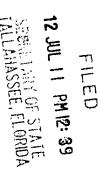
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Speak Easy Solutions, LLC (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Megan Lewellen (Contact Person)
Speak Easy Solutions, LLC (Firm/Company)
PO BOX 621217
(Address)
Oviedo Fl 32760.1212
(City/State and Zip Code)
For further information concerning this matter, please call:
Megan Lewellen at 407, 359 5093 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$ Certified Copy
STREET/COURIER ADDRESS: MAILING ADDRESS:
Registration Section Registration Section  Division of Corporations Division of Corporations
Division of Corporations  Clifton Building  Division of Corporations  P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32314
Tallahassee, Florida 32301

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

<u>~</u>	limited liability company as it ap	ppears on the records	of the Florida	a Depai	tment
of State is:	syeur Lus y	3010110113		, <u></u>	·····•
	$\bigcup$		<u>_</u> ,	· 2	
2. This limited liabi	lity company was organized und	ler the laws of:	AE AE		774
Ţ	-lorida.		4SS	<b>E</b>	_
<u> </u>	10110100	<b>-•</b>	EE,	 D	.ED
			1111		U
3. The Florida docu	ment/registration number of this	limited liability com	pany is: 😤	OF STATE	
	040000018919		DĀ.	TT (D	
\ \ \ \	1 , ,	<b>-</b>			
4. Michae	PINETEN	, hereby resign as a _	MAR		
(Print No	ame of Person Resigning)	_, nereby resign as a _	(Print 1	Title)	
	oility company and affirm the lim	nited liability compan	v has been n	otified (	of my
resignation in wri	• •	into a nationary company	j ikus occir in		
J	$\infty$				
M1	10/				
Signature of Dogic	oning Nambar Managing Mami	an an Managan			
Signature of Resig	gning Member, Managing Memb	ber or Manager			
Filing Fee:	\$25.00 (Required)				
Certified Copy:	\$30.00 (Optional)				