L04000091780

(Requestor's Name)				
(Address)				
, ,				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
L. SELLERS				
FEB 1 8 2008				

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EXAMINER



900118029329

02/15/08--01019--017 **25.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

	Division of Corporations		
	SUBJECT: Ashtin Technologies, LLC		
	(Name of Limited Liability Con	mpany)	
	The enclosed member, managing member or manager resigning.	gnation and fee(s) are submitted for	
	Please return all correspondence concerning this matter to:		
	Daniel Bolstridge		
	(Contact Person)	_	
	Ashtin Technologies, LLC		
	(Firm/Company)	_	
	720-E Capital Circle NE		
	(Address)	_	
	T		
	Tallahassee, FL 32301	_	
	(City/State and Zip Code)		
	For further information concerning this matter, please call:		
	Daniel Bolstridge at (850	, 878-2846	
		& Daytime Telephone Number)	
	Enclosed please find a check made payable to the Florida I	Department of State for:	
	\$25 Filing Fee	\$55 Filing Fee &	
	_	Certified Copy	
	STREET/COURIER ADDRESS:	MAILING ADDRESS:	
	Registration Section	Registration Section	
Ţ::	Division of Corporations Clifton Building	Division of Corporations	
		P.O. Box 6327 Tallahassee, Florida 32314	
	,2661 Executive Center Circle Tallahassee, Florida 32301		
·	CR2E079 (506)	•	, ,



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

	NAGING MEMBER OR MANAGER LIMITED LIABILITY COMPANY
1. The name of the limited liability company as of State is: Ashtin Technologies.	it appears on the records of the Florida Department, LLC
2. This limited liability company was organized Florida	l under the laws of:
3. The Florida document/registration number of L04000091780	this limited liability company is:
4.I. Kevin Bear	, hereby resign as a Member
(Print Name of Person Resigning)	(Print Title)
of this limited liability company and affirm the resignation in writing. Signature of Resigning Member, Managing M	e limited liability company has been notified of my
Signature of Centring laterines, lambafing la	emper or Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	2008 FEB 15 PI SECRETARY OF TALLAHASSEE, I
CR2E079 (5/06)	PH 5