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M. HODGE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: TRENCHCOAT VENTURES, LLC (Name of Limite	C ed Liability Company)
Dear Sir or Madam:	
The enclosed Resignation of Member, Managing M	Member or Manager and fee(s) are submitted for filing
Please return all correspondence concerning this m	atter to the following:
TIMOTHY E. BLAKESLEE	<u> </u>
(Name of Person)	
TRENCHCOAT VENTURES, LLC	
(Firm/Company)	
2583 S. FEDERAL HWY.	
(Address)	
STUART, FL 34994	
(City/State and Zip Code)	
For further information concerning this matter, plea	ase call:
JEFFREY D. LAVENHAR	at (303) 519-1142
(Name of Person)	(Area 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	□\$55 Filing Fee &

CR2E079 (8/05)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I JEFFREY D. LAVENHAR	_, hereby resign as MEMBER/MANAG	ING MEM	3ER
	(Title)		
of TRENCHCOAT VENTURES, LLC			1
(Limited Liability	(Company)		_,
a limited liability company organized under the law	s of the State of FLORIDA		
and affirm that the limited liability company has been	en notified in writing of the resigna	tion.	
(Signature of resigning manager, m	nanaging member or member)	SECOLARIZA SIATE	T

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