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(Re	equestor's Name)				
(Ad	dress)				
(Address)					
(Cit	y/State/Zip/Phone	: #)			
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nam	ne)			
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COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE		d Financial Group, LLC f Limited Liability Company)
Dear Si	r or Madam:	
The end	Placed Resignation of Member Manag	ging Member or Manager and fee(s) are submitted for filing.
	_	- · · · · · · · · · · · · · · · · · · ·
Please i	return all correspondence concerning	this matter to the following:
	Jeremy Sisson	
	(Name of Person)	ZOOG APR -7 PH 4:49 ZOOG APR -7 PH 4:49 LLC CE CE CE
	Emerald Financial Group,	LLC AS B
	(Firm/Company)	LLC PASSEE PASSEE
	9306 Plantation Lakes Cir	rde Til
	(Address)	
	(**************************************	
	Sanford, FL 32771	
<u> </u>	(City/State and Zip Code)	
For furt	her information concerning this matte	er, please call:
	Jeremy Sisson	at (407) 227.8058
	(Name of Person)	(Area Code & Daytime Telephone Number)
	T/COURIER ADDRESS:	MAILING ADDRESS:
~	ation Section	Registration Section
	n of Corporations Building	Division of Corporations P.O. Box 6327
	Recutive Center Circle	Tallahassee, Florida 32314
	ssee, Florida 32301	Talkallassee, Tiorica 32511
Enclose	ed is a check for the following amou	nt:
	\$25 Filing Fee	✓ \$55 Filing Fee &
CR2E079	(8/05)	Certified Copy
-14-4017	(0.00)	



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I,	James Prince	, hereby resign as _			ber
			(Ti	tle)	
of	Emerald F	inancial Group, LLC			
	(Limited	Liability Company)			
a limited	liability company organized under the laws of the State of Florida				
and affirm	n that the limited liability company l	nas been notified in writing	g of the res	signation	1.
	Jan E	P	····	_	
	(Signature of resigning mana	iger, managing member or	member)	_	
			() では、) に、)	TALLAHASSEE, FLO	2006 APR - 7 PM 4:

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