## 05000033792

(Requestor's Name)					
(Address)					
(Address)					
, (Manoso)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
,					
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Special Instructions to Filing Officer:					
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## **COVER LETTER**

for

Division of Corp				
SUBJECT:	Emerald Fir	nancial Gro	oup, LLC	
	(Name of Limit	ted Liability Com	pany)	
The enclosed member, nfiling.	nanaging member or	manager resigi	nation and fee(s) are sul	omitted
Please return all correspo	ondence concerning t	this matter to:		
Jere	emy Sisson			
(C	ontact Person)	·	•	
Emerald Fi	nancial Group,	LLC		
(Fi	irm/Company)			
250 Internation	onal Pkwy Ste 3	330		
	(Address)		•	
Heathr	ow, FL 32746			
(City/S	State and Zip Code)		•	
For further information of	concerning this matte	r, please call:		
Emerald Financ	ial Group, LLC	at ( 407	805.9967	
(Name of Conta		(Area Code	& Daytime Telephone Nu	imber)
Enclosed please find a cl	heck made payable to ling Fee		epartment of State for: 55 Filing Fee & Certified Copy	
STREET/COURIER A	DDRESS:		MAILING ADDRESS	<b>3:</b>
Registration Section	-		Registration Section	m.c
Division of Corporations Clifton Building	<b>š</b>		Division of Corporation P.O. Box 6327	12
2661 Executive Center (	Circle		Tallahassee, Florida 32	314
Tallahassee, Florida 323			,	

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

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

	limited liability company as merald Financial Gro	it appears on the records of the Florid up, LLC	da Department
2. This limited liab	ility company was organized Florida	under the laws of:	
	ument/registration number of 05000033792	this limited liability company is:	
T. 1,	mes Prince  Jame of Person Resigning)	, hereby resign as a President/	Managing Member
of this limited lia resignation in wr		e limited liability company has been i	notified of my
Jan	~ EPi		
Signature of Res	gning Member, Managing M	ember or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		SECRETARY OF STATE DIVISION OF CORPORATION OF CORPORATION OF NOV -8 PM 1: 33
CP2E070 (5/06)			(A)

CR2E079 (5/06)