Division of Corporations

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Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : GASTION, INC.

Account Number : I20080000097 Phone : (305)255-5101

Fax Number : (305)255-9165

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OPA LOCKA PETROLEUM DEVELOPERS, LLC

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Help

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PAGE 02



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: OPA LOCKA SCTROUDY DEVELOPERS, LLC.
2. This limited liability company was organized under the laws of: FLORIOR
3. The Florida document/registration number of this limited liability company is: LOSOOD34429
4. I, WALLEN SANDS hereby resign as a DICECTOL (Print Name of Person Resigning) (Print Title) of this limited liability company and affirm the limited liability company has been notified of my resignation in writing. Signature of Resigning Member, Managing Member or Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)