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(Requestor's Name)				
(Add	dress)			
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	y/State/Zip/Phone	a #1		
. (OR	y/State/Zip/Filoti	⊙ #)		
PICK-UP	MAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Do	cument Number)			
Certified Copies	Certificates	s of Status		
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Special Instructions to I	Filing Officer			
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Office Use Only



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TALLAHASSEE, FLORIDA TALLAHASSEE, FLORIDA

COVER LETTER

Registration Section Division of Corporations

TO:

D 4 0			
SUBJECT: Bay Area Games,	LLC		
(Name of L	imited Liability Co	mpany)	
The enclosed member, managing member filing.	or manager resig	gnation and fee(s)	are submitted for
Please return all correspondence concernir	ng this matter to:		
David M. Sargent			
(Contact Person)		_	
n/a			
(Firm/Company)			
12123 Feldview Creek Lane		_	Z.
(Address)			£55 59
Riverview, FL 33569			TOEC TEST
(City/State and Zip Code)			AS - I
For further information concerning this ma	atter, please call:		FESTATION OF
David M. Sargent	_{at (} 813	741-2110	4
(Name of Contact Person)	(Area Code	e & Daytime Teleph	one Number)
Enclosed please find a check made payable \$25 Filing Fee		Department of Sta \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS:		MAILING ADI	
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle	Tallahassee, Florida 32314		

CR2E079 (5/06)

Tallahassee, Florida 32301



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 ay Area Games, LLC	it appears on the records of the	he Florida Depa	artment
2. This limited liab. The State	ility company was organized of Florida	under the laws of:	2001 DEC -7 SECRETARY TALLAHASSE!	
3. The Florida docu L050000 4	•	this limited liability company	05 STA	
4. I. David M.	Sargent	, hereby resign as a MC	ARM =	
(Print N	ame of Person Resigning)		(Print Title)	
of this limited lial resignation in wr		e limited liability company ha	as been notified	d of my
Signature of Resi	gning Member, Managing M	lember or Manager		
Filing Fee:	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			