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C. LEWIS SEP 1 5 2009 EXAMINER

#### **COVER LETTER**

Division of Corporations	
SUBJECT: Finish Line, LC (Name of Limited Liability	Company)
The enclosed member, managing member or manager r filing.	esignation and fee(s) are submitted for
Please return all correspondence concerning this matter	· to:
Michael Pesula (Contact Person)	·
FINISH LINE, LLC (Firm/Company)	<del></del>
1008 Charlotta Street	<del></del>
F+ Pierce, F1 34982 (City/State and Zip Code)	
For further information concerning this matter, please of	eall:
Michael Pesula at (77 (Name of Contact Person) (Area C	Ode & Daytime Telephone Number)
Enclosed please find a check made payable to the Flori \$25 Filing Fee	da Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Tallahassee, Florida 32301

CR2E079 (5/06)



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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

	limited liability company as it appears on the records of the Florida Department
2. This limited liab	ility company was organized under the laws of:
	ment/registration number of this limited liability company is:
of this limited lial resignation in wr	me of Person Resigning)  cility company and affirm the limited liability company has been notified of my iting.  gning Member, Managing Member or Manager
	\$25.00 (Required) \$30.00 (Optional)