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(Re	equestor's Name)	- "		
(Ad	dress)			
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(Cit	y/State/Zip/Phon	e #)		
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OF LOWER OF STREET

COVER LETTER

TO: Registration Section	
Division of Corporations	
	•
SUBJECT: BARNES USA LLC	
(Name of Limited Liability Con	npany)
The enclosed member, managing member or manager resig filing.	nation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
Julie DUBERNARD	
(Contact Person)	-
	-
(Firm/Company)	a 5
0044 NE 401L AVE	OT APR I
8941 NE 10th AVE	- PR
(Address)	12
Miami, FL - 33138	07 APR 12 PM 1: 13
(City/State and Zip Code)	_
(englesme and Exp ====)	••
For further information concerning this matter, please call:	ယ
	004 4000
	301 1269
(Name of Contact Person) (Area Code	& Daytime Telephone Number)
Enclosed please find a check made payable to the Florida D	Department of State for:
\$25 Filing Fee	55 Filing Fee &
· · · · · · · · · · · · · · · · · · ·	Certified Copy
CERTIFICATION ADDRESS.	MAILING ADDRESS:
STREET/COURIER ADDRESS: 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	s it appears on the records of the Florida	Department
-	ility company was organized	d under the laws of:	DIVISION OF C 07 APR 12
3. The Florida doc L050000	-	f this limited liability company is:	PH I:
4. I. Frederic	M JOCH Tame of Person Resigning)	, hereby resign as a MGR (Print Ti	
	bility company and affirm th	ne limited liability company has been not	
Signature of Resi	gning Member, Managing N	Member or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		

CR2E079 (5/06)