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S. HAWKES
FEB 1 7 2009
EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJI	ECT: Coastwide Capital Mana	gement, LLC
	(Name of Limite	d Liability Company)
The enfiling.	nclosed member, managing member or m	nanager resignation and fee(s) are submitted for
Please	return all correspondence concerning th	is matter to:
Mich	ael R. Niklasch	
	(Contact Person)	
MJ&l	N Enterprises, LLC	
	(Firm/Company)	
1193	31 31st Court North	
	(Address)	
St. F	Petersburg, FL. 33716	
	(City/State and Zip Code)	
For fu	rther information concerning this matter	, please call:
Mich	nael R. Niklasch	at (727) 573-1644
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclos	sed please find a check made payable to \$25 Filing Fee	the Florida Department of State for: \$55 Filing Fee & Certified Copy
Regist Divisi Cliftor 2661	cet/courier address: tration Section on of Corporations n Building Executive Center Circle hassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	mited liability company as it stwide Capital Mar		the Florida Department
2. This limited liability Florida	ty company was organized ur	nder the laws of:	16 PH 1: 39
3. The Florida docum L0500058	nent/registration number of th	is limited liability compar 	ny is:
(Print Nan	ne of Person Resigning) ity company and affirm the li	, hereby resign as a M	(Print Title)
Signature of Resign	ing Member, Managing Men	nber or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		

CR2E079 (5/06)