L05000062939

Robert C. Dean				
, / (Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status/				
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DEPARTIA DI STATE DIVISION DE CORPORATION TALLAHASSEE/FLORIDA

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8 JUNIO PM 2: 4



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:	ALEXIS CAPITAL, LLC		*
7 This limited liah	ility company was organized	Lunder the laws of	08. SEC
	my company was organized	dider the laws of.	JUN 10 CRETAR LAHASS
Florida		·	ASP TO
			<u>~</u> ~ ——
3. The Florida docu	ument/registration number o	f this limited liability com	pany is:
L0500006293	9		pany is: FLORI
			Qr.
4. I, <u>robert c</u>	DEAN	, hereby resign as a	MANAGER
(Print N	ame of Person Resigning)		(Print Title)
	bility company and affirm th	e limited liability compan	y has been notified of my
resignation in wri	iting.		
	2 1/1	•	
Mobile	Callan		
Signature of Resi	gning Member, Managing M	1ember or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		