L05000068216

(Requestor's Name)	
(Address)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Sacroso Sant) (Tarres)	
(Document Number)	
Certified Copies Certificates of Status	
Charles Instructions to Filing Officer	
Special Instructions to Filing Officer:	

Office Use Only



800077585118

08/01/06--01004--008 **25.00

FILED

SECREDADING SEATER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Motor We (Name of Lim	ited Liability Company)
Dear Sir or Madam:	
The enclosed Resignation of Member, Managing	Member or Manager and fee(s) are submitted for filing
Please return all correspondence concerning this	matter to the following:
Travis S. Gray (Name of Person)	···
Motorworks LC (Firm/Company)	
3781 NW 84th Ave #10 (Address)	·
Suncise, FC 33351 (City/State and Zip Code)	·
For further information concerning this matter, pl	ease call:
(Name of Person)	at (<u>954</u>) <u>746 - 5851</u> (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy
CR2E079 (8/05)	Cerunica Copy



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

	-
I, Travis S. Gray hereby resign as CE	(Title)
of MotorWorks LLC (Limited Liability Company)	
a limited liability company organized under the laws of the State of	<u>12</u>
and affirm that the limited liability company has been notified in writing of the	resignation.
nevis S ()	_
(Signature of resigning manager, managing member or member	O6 JI SECK TALL
	FILE UL 31 VELLARI AHASSE
	PR 3: E, FLO

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314