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SECRETARY OF STATE DIVISION OF LORF OR ATIONS



COVER LETTER

TO: Registration Section Division of Corporations	÷	
SUBJECT: McLaren Shafer One LLC (Name of Limited 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:	
Jonti McLaren		
(Name of Person)		
(Firm/Company)	<u></u>	
823 Bruce Drive	· · · · · · · · · · · · · · · · · · ·	
(Address)		
Palo Alto, CA 94303		
(City/State and Zip Code)	Ž.	
For further information concerning this matter, p	lease call:	
Jonti McLaren	at (415) 265 - 2121	
(Name of Person)	lease call: at (415) 265 - 2121 (Area Code & Daytime Telephone Number) MAILING ADDRESS:	
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)		



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I. Jonti McLaren	, hereby resign as Manager
	(Title)
of McLaren Shafer One LLC	
(Limited	Liability Company)
a limíted liability company organized under the	he laws of the State of Florida
and affirm that the limited liability company l	has been notified in writing of the resignation.
Both Me/a	ager managing member or member)

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

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