105000/00306

	_
(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	
()	
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DIVISION OF CORPORATIONS
OF CORPORATIONS
OF LAN -4 PM 2: 04

J. BRYAN

JAN - 7 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: IN GOD'S COUNTRY, L	LC	
(Name of Limite	ed Liability Company)	
The enclosed member, managing member or n filing.	nanager resignation and fee(s) are submitted for	
Please return all correspondence concerning th	nis matter to:	
Stoce Suplier (Contact Person)		
(Contact Person)		0 EV
IN GOD'S COUNTRY, LLC		08 JAN -4 PH 2: 04
(Firm/Company)		4-1
10488 NW 1st Court		P
(Address)		2:0
Coral Springs, FL 33071		£
(City/State and Zip Code)		
For further information concerning this matter	, please call:	
Stacey O'Malley	at (954) 227-2001	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to \$25 Filing Fee	the Florida Department of State for: \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	
Division of Corporations Clifton Building	Division of Corporations 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

1. The name of the limited liability company as it ap of State is: IN GOD'S COUNTRY, LLC	opears on the records of the Florida Departmen	it
2. This limited liability company was organized und Florida	der the laws of:	
3. The Florida document/registration number of this L05000100306		SECRE
4. I, John O'Malley (Print Name of Person Resigning)	, hereby resign as a	CRETAR ION OF C
of this limited liability company and affirm the limited resignation in writing. Signature of Resigning Member, Managing Member	nited liability company has been notified of my	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)		