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SECRETARY OF STATE

T. CLINE

JAN - 6 2009

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: * The Wadus (Name of Limited Liability Co	
The enclosed member, managing member or manager resigning.	gnation and fee(s) are submitted for
Please return all correspondence concerning this matter to	:
MARIA NORTON (Contact Person)	<u> </u>
THE WATERS LLC (Firm/Company)	
4948 BAYBRIDGE BIVI) (Address)	
(City/State and Zip Code)	SECRET JAN
For further information concerning this matter, please call	ASSET
MARIA NORTON at (239 (Name of Contact Person) (Area Code	SECRETARY OF S SECRETARY OF S L716-9466 Number e & Daytime Telephone Number
Enclosed please find a check made payable to the Florida \$25 Filing Fee	
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

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	nited liability company as アおと ん			of the Florida	_	nt
2. This limited liabilit	y company was organized	d under the	e laws of:			
4. I, MALIA (Print Nam	e of Person Resigning) ity company and affirm th	 , here	eby resign as a _	MGRIPH (Print H)		y
Signature of Resign	uz (o.fm ing Member, Managing M	Member or	Manager .			
Filing Fee: Certified Copy:						