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SECRETARY OF STATE

106 mg/

### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: ONE STUP LUTTUTO (Name of Limited Liability Com	pany) SHUP- LLC
Dear Sir or Madam:	
The enclosed Resignation of Member, Managing Member or Ma	nager and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the fo	llowing:
JOHN P. BICAS (Name of Person)	<u>-</u> .
(Firm/Company)	TALLA
1040 Seminora Duna.	
FORT LAUPONDUE FC (City/State and Zip Code)	-330X FLORIDA
For further information concerning this matter, please call:	
(Name of Person) at (950) (Area Code	& Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

\$55 Filing Fee & Certified Copy

CR2E079 (8/05)

Tallahassee, Florida 32301

Enclosed is a check for the following amount:

\$25 Filing Fee



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, JOHN P BICK hereby resign as	Prosident.  (Title)
of OUF STOD LITERATURE SHO (Limited Liability Company)	r LC.
a limited liability company organized under the laws of the State of and affirm that the limited liability company has been notified in writing (Signature of resigning manager, managing member of the state of (Signature of resigning manager, managing member of the state of (Signature of resigning manager, managing member of the state of (Signature of resigning manager, managing member of the state of (Signature of resigning manager, managing member of the state of (Signature of resigning manager, managing member of the state of (Signature of resigning manager, managing member of the state of (Signature of resigning manager, managing member of the state of (Signature of resigning manager, managing member of the state of (Signature of resigning manager, managing member of the state of (Signature of resigning manager, managing member of the state of (Signature of resigning manager, managing member of the state of	SEP 11 PI AHASSEE.

#### 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