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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP .WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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SECRETARY OF STATE ALLAHASSEE, FLORID.

D. BRUCE

FEB 3 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: TUCKER'S LAND // (Name of Limited Li	ability Company)	
(Name of Emined En	admity Company)	
The enclosed member, managing member or manafiling.	ager resignation and fee(s) a	re submitted for
Please return all correspondence concerning this n	natter to:	
JUDIAH MILLER		
(Contact Person)		
		09 FEB -2 SECRETARY TALLAHASSE
(Firm/Company)		HAS EB-
Po Fox 6885 (Address)		RY OF
(Address)		
SAN RAFAEL, CA 9	74903	PH 1: 02 GF STATE E. FLORIDA
(City/State and Zip Code)		
For further information concerning this matter, ple	ease call:	
	415 446-73	50
(Name of Contact Person) at (415 446 - 73 Area Code & Daytime Telepho	one Number)
Enclosed please find a check made payable to the \$25 Filing Fee	Florida Department of State \$55 Filing Fee & Certified Copy	e for:
STREET/COURIER ADDRESS:	MAILING ADD	RESS:
Registration Section	Registration Secti	
Division of Corporations	Division of Corpo	orations
Clifton Building	P.O. Box 6327	1 20214
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Flori	da 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

1. The name of the of State is:	limited liability company as	it appears on the records of ANDING LLC	
	ility company was organized	d under the laws of:	
	ment/registration number of	f this limited liability comp	pany is:
	wallact ame of Person Resigning)	, hereby resign as a _	MANAGER MEMBER (Print Title)
of this limited lial resignation in wr	pility company and affirm th	e limited liability company	y has been notified of my
100			
Signature of Resi	gning Member, Managing N	Member or Manager	09 FE
Filing Fee:	\$25.00 (Required)		HASS TA
	\$30.00 (Optional)		RY OF SEE, FL