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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Quantum Fiber (Name of Limite	LLC ed Liability Company)
The enclosed member, managing member or national filing.	nanager resignation and fee(s) are submitted fo
Please return all correspondence concerning th	is matter to:
Peter Naples (Contact Person)	74 Ca
QUANTUM FIBER LLC (Firm/Company)	2000 217 217 2000 2000 2000 2000 2000 20
P.o. Box 540 855 (Address)	
Merritt Island, 1= (City/State and Zip Code)	1- 33954
For further information concerning this matter	, please call:
Peter NAPICS (Name of Contact Person)	at (321) 5/4-9580 (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 Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Tallahassee, Florida 32301

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

. This limited liability company was organized	under the laws of:		THE CO	2013 OCT	
Florida	<del></del> -			0CT II	MARKET MA
. The Florida document/registration number of L 0600000 745 4	this limited liability compar	ny is:	Mark Property of the Control of the	0 PH 2 38	g g g g
. I, Peter NAPI= S (Print Name of Person Resigning)	, hereby resign as a	Maring (Prin	<u> </u>	DIR	ecto a
of this limited liability company and affirm the resignation in writing.					

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)