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(Re	questor's Name)	
(Ad	dress)	
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(City	y/State/Zip/Phone	e #)
PICK-UP		
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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
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Chad T. Orsatti, J.D., M.B.A.

of Counsel: David J. Wollinka, Esq.



3204 Alternate 19 North Palm Harbor, Florida 34683 727.772.9060 Telephone 727.771.8800 Facsimilie www.orsattilaw.com

August 23, 2006

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

RE: Makamadi, LLC

Dear Sir or Madam:

Enclosed please find properly executed Resignation of Member/Managing Member and Statement of Change of Registered Agent forms for the above-referenced Florida limited liability company. Also enclosed please find check number 2177 in the amount of \$50.00 for the applicable filing fees. Kindly return all correspondence regarding both limited liability companies to the undersigned at address listed above.

Thank you for your assistance.

Sincerely,

Chad T. Orsatti, Esq.

CTO/bc

Enclosures

88 AUG 28 AH 10: 08



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Bryan M. Ruthig

. .

hereby resign as Managing Member/Member

(Title)

3002

AUG 28 AM 10: 08

FILED

of Makamadi, LLC

(Limited Liability Company)

a limited liability company organized under the laws of the State of Florida

and affirm that the limited liability company has been notified in writing of the resignation.

L

(Signature of resigning manager, managing member or member)

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

CR2E079 (8/05)