L06000009332

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(Address)	
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SECRETARY OF STATE.

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 1110 Amusements LLC	
(Name of Limited Lia	lability Company)
The enclosed member, managing member or mana filing.	ager resignation and fee(s) are submitted for
Please return all correspondence concerning this m	matter to:
Antoinette S. Gayer	
(Contact Person)	
Fox & Ellis, Attorneys	200 TALL
(Firm/Company)	
4020 Del Prado Blvd. S., Suite A-1	DOTHAR 19 P
(Address)	OF S
Cape Coral, FL 33904	TATE ORID
(City/State and Zip Code)	
For further information concerning this matter, ple	ease call:
Antoinette S. Gayerat (239) 542-1412
(Name of Contact Person) (A	Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$\sqrt{25}\$ Filing Fee	Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327
Tallahassee, Florida 32301	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

1. The name of the limited liability company as it appears on the records of State is: 1110 Amusements, LLC	of the Florida	Depart	ment
2. This limited liability company was organized under the laws of: Florida	SECRETAR TALLAHASS	2001 MAR 1 9	
3. The Florida document/registration number of this limited liability con L06000029332	RY OF STATE	D ښ	8
4. I, Nick Chionis , hereby resign as a (Print Name of Person Resigning)	Manager (Print Ti	23 ²³	
of this limited liability company and affirm the limited liability comparesignation in writing.	•		f my
Signature of Pasigning Member Managing Member or Manager			-

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)