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SECRETARY OF STATE
ANASSEE, FLORIDA

J. BRYAN

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EXAMINER

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: 8-BAY TRADERS TRUST, LLC

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Daniel Coosemans

(Contact Person)

8-BAY TRADERS TRUST, LLC

(Firm/Company)

1900 Sunset Harbour Dr, 2nd FL

(Address)

Miami Beach, FL 33139

(City/State and Zip Code)

For further information concerning this matter, please call:

Daniel Coosemans

,,305 \ 89508

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

■ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

SECRETARY OF STATE

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as AY TRADERS TRUST	it appears on the records of the control of the con	the Florida Department
2. This limited liab	ility company was organized	d under the laws of:	
3. The Florida docu <u>L060000345</u>	-	f this limited liability compar	ny is:
4. I, John Olsen (Print Name of Person Resigning) of this limited liability company and affirm resignation in writing.		, hereby resign as a Manage, hereby resign as a	(Print Title)
Signature of Resi Filing Fee: Certified Copy:	gning Member, Managing N \$25.00 (Required) \$30.00 (Optional)	Member or Manager	ZONZ NOV 16 PM 1: SECRETARY OF STATALLAHASSEE, FLORE