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(Re	questor's Name)	
(A.1	\	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	•
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		,
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09/18/06--01017--017 **25.00

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Falcon Acquisitions, LLC (Name of Limit	ited Liability Con	npany)		
Dear Sir or Madam:				
The enclosed Resignation of Member, Managing	Member or Ma	anager and fee(s) are submitte	d for filing	g.
Please return all correspondence concerning this	matter to the fo	ollowing:		
Chase Y Clark				
(Name of Person)		_		
Falcon Acquisitions, LLC			SECR	06 SEI
(Firm/Company)			SS SS	=
8002 Terrace Ridge Drive (Address)		_	ECRETARY OF STATE	06 SEP 18 PM12: 56
(Audiess)			뙲	.;·
Temple Terrace, FL 33637			≽m	6
(City/State and Zip Code)				
For further information concerning this matter, pl	lease call:			
Chase Y Clark	at (_813	₎ 7894130		
(Name of Person)	(Area Code	e & Daytime Telephone Numb	er)	
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		
Enclosed is a check for the following amount:				
\$25 Filing Fee CR2E079 (8/05)		\$55 Filing Fee & Certified Copy		



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Douglas E Bilbo	, hereby resign as Managing Member (Title)	
of Falcon Acquisitions, LLC (Limited Liability	SEC PALL	
a limited liability company organized under the laws	of the State of Florida SSHE OF	
and affirm that the limited liability company has bee	RID RID	
(Signature of nesigning manager, m.	A 6	

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