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| (Requestor's Name) | _ |
|---|-------------|
| | |
| (Address) | |
| | |
| (Address) | |
| (Addless) | |
| | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| | |
| (Business Entity Name) | |
| , , , | |
| (Daguerant Number) | |
| (Document Number) | |
| | |
| Certified Copies Certificates of Status | _ |
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| Special Instructions to Filing Officer: | \neg |
| operation to thing officer. | |
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SECRETARY OF STATE

C. LEWIS

OCT 312008

EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations | |
|---|---|
| Division of Corporations | |
| SUBJECT: Name of Limited | 1 Liability Company) |
| | |
| The enclosed member, managing member or managing. | anager resignation and fee(s) are submitted for |
| Please return all correspondence concerning this | s matter to: |
| MATT ACEXANDER (Contact Person) | |
| (Contact Person) | |
| 1 1 1 7 | |
| (Firm Company) | |
| & 11 BLACKWARER C | |
| (Address) | |
| (Firm Company) **II BLACK WARE (Address) **WEY LARGO F1 330 (City State and Zip Code) | 37 |
| For further information concerning this matter, | |
| . . | |
| MATT Akx 1- Jer al (Name of Contact Person) | 1(305) 8498017 |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) |
| Enclosed please find a check made payable to the | he Florida Denartment of State for: |
| \$25 Filing Fee | \$55 Filing Fee & |
| | Certified Copy |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: |
| Registration Section | Registration Section |
| Division of Corporations | Division of Corporations |
| Clifton Building | P.O. Box 6327 |
| 2661 Executive Center Circle | Tallahassee, Florida 32314 |
| Tallahassee, Florida 32301 | |

CR2E079 (5 06)



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SCURLIANT OF VIATORIOA

TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

| as it appears on the records of the Florida Department |
|--|
| zed under the laws of: |
| of this limited liability company is: |
| , hereby resign as a Mon . 66 Men (Print Title) the limited liability company has been notified of my |
| Member or Manager |
| s interince of intillager |
| |