L06000051120

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COVER LETTER

TO: Registration Section **Division of Corporations** E-Z DOCK OF CENTRAL FLORIDA 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: PETER J FLECK (Contact Person) (Firm/Company) 10820 WONDER LANE (Address) WINDERMERE, FL 34786 (City/State and Zip Code) For further information concerning this matter, please call: at (407) 383-8042 (Area Code & Daytime Telephone Number) PETER J FLECK (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: **✓** \$55 Filing Fee & \$25 Filing Fee Certified Copy **MAILING ADDRESS:** STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



FILED 07 MAY 25 PM 3: 48 SECKLIARY OF STATE TALLAHASSEE, FLORIDA

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 i of State is: E-Z DOCK OF CENT	t appears on the records of the Florida Department RAL FLORIDA LLC
2. This limited liability company was organized in FLORIDA	under the laws of:
3. The Florida document/registration number of t L0600051120	this limited liability company is:
4. I, BRAD T HENRY (Print Name of Person Resigning)	, hereby resign as a MEMBER (Print Title)
of this limited liability company and affirm the resignation in writing.	limited liability company has been notified of my
Signature of Resigning Member, Managing Me	Wenn ember of Manager
Filing Fee: \$25.00 (Required)	

Certified Copy:

\$30.00 (Optional)