Lob 0000 63486

(Re	equestor's Name)	
(Ac	idress)	*** · · · · · · · · · · · · · · · · · ·
(Ac	idress)	.
(Ci	ty/State/Zip/Phone	- #\
	WAIT	
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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B. BOSTICK
DEC 1 7 2012
EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: MUSTANG COMMUNICATIONS (Name of Limited Liability)	Company)
The enclosed member, managing member or manager refiling.	esignation and fee(s) are submitted for
Please return all correspondence concerning this matter	to:
KETTH A. GJERKE	
(Contact Person)	
(Firm/Company)	
1280 SURON DR	7A 72
(Address)	
TITUSVILLE FL 32796	ASSE
(City/State and Zip Code)	
For further information concerning this matter, please ca	((a))
KETTH A GAERKE at (321	863-4842
(Name of Contact Person) (Area C	ode & Daytime Telephone Number)
Enclosed please find a check made payable to the Florid	a 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	P.O. Box 6327
2661 Executive Center Circle 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 of State is: M	limited liability company a ISTING COMMUNICA	is it appears on the records	of the Flor	rida Dep	artmer	nt
2. This limited liab	ility company was organize	ed under the laws of:				
3. The Florida docu 	ment/registration number of	of this limited liability com	pany is:			
4. I, KETTH A. (Print No.	GIERKE ame of Person Resigning)	, hereby resign as a	MNAGEX (Pr	QU. int Title)	14747	K
of this limited liab resignation in wri	oility company and affirm t ting.	he limited liability compar	ıy has beer	n notified	ofmy	y
Kauth A	Sukl		.,			
Signature of Resi	gning Member, Managing	Member or Manager		IA CLU	12 D	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		\$7 \$2 \$3 \$4 \$4 \$4 \$4 \$4 \$4 \$4 \$4 \$4 \$4 \$4 \$4 \$4	HASSE	FC 114	1

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