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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BLITZKRIEG, LLC	
(Name of Limited Liab	ility Company)
The enclosed member, managing member or manag filing.	er resignation and fee(s) are submitted fo
Please return all correspondence concerning this ma	tter to:
BRIDGET SACHER-BROWN	
(Contact Person)	
	-
(Firm/Company)	ZEC TAPEL
4558 ESTUARY PLACE	ARE SE
(Address)	TARY ASSI
LAND O LAKES, FL 34639	P STATE
(City/State and Zip Code)	TAI ORII
For further information concerning this matter, plea	
BRIDGET SACHER-BROWN at (813 299-5070
(Name of Contact Person) (Ar	ea Code & Daytime Telephone Number)
Enclosed please find a check made payable to the F 25 Filing Fee	lorida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301



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 lin of State is: BLITZ	nited liability company as it ap ZKRIEG, LLC	pears on the records	of the Flori	da Dep	partment
2. This limited liabilited FLORIDA	y company was organized und	er the laws of:	SECRETARY TAULAHASSE	2008 SEP 111	
3. The Florida docum		,	RIGA	D 2:42	5
4. I, BRAD OTTO)	, hereby resign as a _	MANAG	ER/N	1EMBER
of this limited liabilities resignation in writing	e of Person Resigning) ity company and affirm the lim	ited liability compan	(Prin	t Title)	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				