L06000082463

| (Requestor's Name) | |
|-----------------------------------------|----------|
| (Address) | <u>.</u> |
| | |
| (Address) | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MA | AIL. |
| | |
| (Business Entity Name) | |
| (Document Number) | |
| | |
| Certified Copies Certificates of Status | |
| Consideration to Filling Office | |
| Special Instructions to Filing Officer: | |
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Office Use Only



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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

JAN 2 7 2009

EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| SUBJECT: Executive Yacht Charters, UC (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: | | | | | |
| Peggy Miller (Contact Person) | | | | | |
| Executive Yachts (Firm/Company) | | | | | |
| 250 SW Monterey Rd | | | | | |
| Stuart, FL 34994 (City/State and Zip Code) | | | | | |
| For further information concerning this matter, please call: | | | | | |
| Place Miller at (772) 692-2272 (Area Code & Daytime Telephone Number) | | | | | |
| Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee Certified Copy | | | | | |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 | | | | | |

Tallahassee, Florida 32314

CR2E079 (5/06)

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 of State is: | limited liability company as in XLCUTIVE YA | t appears on the records | of the Florida Department HEYS, LLC |
|--------------------------------------------|---------------------------------------------|---------------------------|----------------------------------------|
| 2. This limited liab | oility company was organized t | under the laws of: | |
| | ument/registration number of t 082463 | his limited liability com | pany is: |
| 4. I, Miche (Print N | He Holmes Jame of Person Resigning) | , hereby resign as a | Manager (Print Tille) |
| of this limited lial resignation in wri | bility company and affirm the iting. | limited liability compan | y has been notified of my |
| Signature of Resi | te Ocloses igning Member, Managing Me | ember or Manager | |
| - | | - | |
| Filing Fee: | \$25.00 (Required) | | |
| Certified Copy: | \$30.00 (Optional) | | o ⁹ |

CR2E079 (5/06)

SECRETARY OF STATE DIVISION OF CORPORATIONS