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(Re	equestor's Name)	
(Ad	Idress)	
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SECRETART 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 of State is:	limited liability company as it appears on the records of the Florida Department Outh Florida PARATRANSIT SERVICES, LLC.
2. This limited liab	ility company was organized under the laws of: of Florida.
3. The Florida docu	ument/registration number of this limited liability company is:
· · · · · · · · · · · · · · · · · · ·	J. LAWSIN , hereby resign as a GENERAL PARTICLE (Print Title)
of this limited lial resignation in wri	bility company and affirm the limited liability company has been notified of my iting.
Roymono Signapure of Resi	gning Member, Managing Member or Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)

CR2E079 (5/06)

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: South Florida (Name of Limited	Apateansit Seevices, LLC
The enclosed member, managing member or m filing.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning the	is matter to:
Danny Hester, MANA (Contact Person)	ger
South Florida Aentran (Firm/Company)	isit services, LLC
5762 OKeechphee Blvd. (Address)	5-205
West Palm Beach, Florid (City/State and Zip Code)	le 33417
For further information concerning this matter,	
Danny Hester a (Name of Contact Person)	t (561) 667-4/07 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to t \$25 Filing Fee	he Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	/

CR2E079 (5/06)