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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cid	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	me)
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Certified Copies		s of Status
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SECKETARY OF STATE

NOV 1 2 2013

T. BROWN

COVER LETTER

TO; Registration Section **Division of Corporations**

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

For further information concerning this matter, please call:

TEUDEAU, SR at (954) 914-8850 (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for: \$55 Filing Fee &

■ \$25 Filing Fee

STREET/COURIER ADDRESS:

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

MAILING ADDRESS:

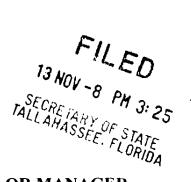
Certified Copy

Registration Section **Division of Corporations** P.O. Box 6327 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

	limited liability company as it appears on the records of the Florida Department
of State is:	LARDSWIPE MARKETING, LLC
	oility company was organized under the laws of:
	P E B B
3. The Florida doc	ument/registration number of this limited liability company is:
L060	000112961
4. 1, DAVID (Print N	LTEUDEAU, TR, hereby resign as a UGRU Jame of Person Resigning) (Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Marida	Luden h
Signature of Resi	igning Member, Managing Member or Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)