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(Re	equestor's Name)	•		
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SECRETARY OF STATE
ALLAHASSEE FLORIO

COVER LETTER

Division of Corporations		
SUBJECT: TNK - ART SIGNS LTD. (Name of Limited Liability Com	Co.	
The enclosed member, managing member or manager resign filing.	nation and fee(s) are submitted fo	r
Please return all correspondence concerning this matter to:		
BEATRIZ OMS (Contact Person)		
	SECRE TALLAH	07 NO
(Firm/Company)	SECRETARY OF STATE LLAHASSEE, FLORIDA	V 21
9305 SW 72ND AVE # 211 A (Address)	E FLOI	₽:
MIAMI FL. 33143 (City/State and Zip Code)	ATE RIDA	<u>.</u> ت
For further information concerning this matter, please call:		
BEATRIZ OMS at (305 (Name of Contact Person) (Area Code	& Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida D	•	
Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Tallahassee, Florida 32301	•	

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:	limited liability company as エルド - A PT らにのいら	it appears on the records of LTD. CO.	of the Florida Department
	ility company was organized	d under the laws of:	
	ument/registration number of	f this limited liability com	pany is:
4. I, <u>SEAT</u> (Print N	TRIZ OMS Jame of Person Resigning)	, hereby resign as a	MANAGER/MEMBER (Print Title)
	bility company and affirm th		
Signature of Resi	igning Member, Managing N	Member or Manager	07 NO TALLAH
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		W21 PH 1. ASSEE, FLOR