L07000019352

| (Requestor's Name) | | | | |
|-------------------------|----------------------|-----------|--|--|
| (Address) | | | | |
| (Ac | ddress) | | | |
| (Ci | ty/State/Zip/Phone a | #) | | |
| . PICK-UP | WAIT | MAIL | | |
| (Bu | usiness Entity Name | e) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates o | of Status | | |
| Special Instructions to | Filing Officer: | LS | | |
| | | | | |
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2007 OCT 11 PH 2: 55
SECRETARY OF STATE
TALL ANASSEE FLORIDA

COVER LETTER

| TO: Registration Section Division of Corporations | | | | |
|--|--|--|--|--|
| SUBJECT: Atlantic Star Exports, LLC | | | | |
| (Name of Lim | ited Liability Company) | | | |
| The enclosed member, managing member or filing. | manager resignation and fee(s) are submitted for | | | |
| Please return all correspondence concerning | this matter to: | | | |
| Tom Pye | | | | |
| (Contact Person) | | | | |
| Pye Law Firm | | | | |
| (Firm/Company) | | | | |
| 3909 W Newberry Road, Ste | e C | | | |
| (Address) | | | | |
| Gainesville, Florida 32607 | | | | |
| (City/State and Zip Code) | | | | |
| For further information concerning this matter | er, please call: | | | |
| Tom Pye | at (352) 381-9799 | | | |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) | | | |
| Enclosed please fund a)check made payable t | o the Florida Department of State for: \$55 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 | | | |
| 2661 Executive Center Circle | Tallahassee, Florida 32314 | | | |

CR2E079 (5/06)

Tallahassee, Florida 32301

1/4



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 antic Star Exports, | | s of the Florida Department |
|--|---|--------------------------|-----------------------------|
| 2. This limited liab | ility company was organized u | under the laws of: | |
| L070000 | <u> </u> | <u> </u> | |
| 4. I, Jeremiał | n Carver | , hereby resign as a | MGRM |
| (Print N | lame of Person Resigning) | | (Print Title) |
| of this limited lia resignation in wr | bility company and affirm the iting. | limited liability compar | ny has been notified of my |
| | AM_ | | · |
| Signature of Res. | igning Member, Managing Me | mber or Manager | |
| Filing Fee: | \$25.00 (Required) | | |
| Certified Copy: | • • • | | |
| | | | (|

CR2E079 (5/06)

SECRETARY OF STATE