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COVER LETTER

Registration Section

τO:

Division of Corporations	
SUBJECT: West Coast He (Name of Limited)	one Watch, LLC Liability Company)
The enclosed member, managing member or ma filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
Raymond M. Eggerm (Contact Person)	ont
· · · · · · · · · · · · · · · · · · ·	
(Firm/Company)	
(
10 Sportsman Terrace	
Rotanda West FL 33 (City/State and Zip Code)	947
For further information concerning this matter, p	please call:
Raymond M. Eggermontat (Name of Contact Person)	(941) 626-3592 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	e Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	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

		it appears on the records of the Flo Home Watch,	_
2. This limited liab	ility company was organized	under the laws of:	
	ument/registration number of	this limited liability company is:	
4. I, Raymon	ad M. Eggermon Jame of Person Resigning)	the hereby resign as a (Pr	R ()
of this limited lial resignation in wr	·- ·	e limited liability company has bee	en notified of my
Signature of Resi	gning Member, Managing M	ember or Manager	
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)	-	07 07