Division of Corporations da Department of State

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EXAMINER

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SECRETARY 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

	limited liability company as ing Capital Manag		of the Florida Department
2. This limited liab Florida	ility company was organized	l under the laws of:	
3. The Florida docu L0700004	ment/registration number of 40936	f this limited liability com	pany is:
4. I, John Kozak (Print Name of Person Resigning)		, hereby resign as a	(Print Title)
of this limited lial resignation in wr	bility company and affirm the iting.	e limited liability compan	y has been notified of my
Signature of Bes	gning Member, Managing N	Iember or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		

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