## L07000041550

(Re	questor's Name)			
•	•			
(Address)				
(Address)				
(0)	101 17: 151	46		
(Cit	ty/State/Zip/Phone	: #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nam	ne)		
(Document Number)				
(50	outhon: Humbon			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
		j		

Office Use Only



100172416791

03/31/10--01001--001 \*\*25.00

BEN CHASSES FOR BRIDE

RECEIVED

B. KOHR
MAR 3 0 2010

EXAMINED

AVISION OF CORPORATIONS

10 MAR 30 PH 22.

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT:   SUBJECT:   SPEAT GRAP  (Name of Limited I	Liability Company)
The enclosed member, managing member or man filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
Chad EITTRELL (Contact Person)	
KITTRELL HOLDINGS LLC (Firm/Company)	<del> </del>
311 EAST Jennings St	1
TAUA HASSEE, FL 323 (City/State and Zip Code)	301
For further information concerning this matter, p	lease call:
Chad RITTIZEU at (Name of Contact Person)	(850) 521 5819 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to th  \$25 Filing Fee	e Florida Department of State for:  \$55 Filing Fee &  Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: 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 a		f the Florida Department
of State is:	GREAT GRAPES (	LC	_
2. This limited liab	lity company was organized un		·
	ment/registration number of thi	s limited liability compa	any is:
4. I, <u>Jon</u> (Print No.	H. GAKUNEYL ame of Person Resigning)	_, hereby resign as a	MGRM (Print Title)
of this limited liab resignation in wri	oility company and affirm the linting.	nited liability company	
· ·	gning Member, Managing Mem	ber or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		•
Cerunea Copy:	aso.oo (Optional)		