L07000053916

(Requestor's Name)
(Address)
(Address)
· · · · · · · · · · · · · · · · · · ·
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Namoel)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900107352089

08/14/07--01030--003 **25.00

07 AUG 14 AM11: 21

COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: American Time (Name of Lin	Share Markoting, LLC nited Liability Company)
The enclosed member, managing member of filing.	r manager resignation and fee(s) are submitted for
Please return all correspondence concerning	this matter to:
Christopher Jahm (Contact Person)	
	Marketing, LLC
1/04 South Powerling Pd. (Address)	
Ponfano Bch. 17 33069 (City/State and Zip Code)	7
For further information concerning this matt	er, please call:
Christopher Dahm	at (C954) 9/3-63// (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee	to the Florida Department of State for: \$55 Filing Fee &
[P] \$23 T Hing 1 00	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327
ZOOT EXECUTIVE CERRET CITCLE	Tallahassee Florida 32314

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

1. The name of the of State is:	limited liability company as	it appears on the record	s of the Florida Dep	partment LC.
2. This limited liab	ility company was organized	under the laws of:		
	ument/registration number of	this limited liability con	mpany is:	
•	anise of the post remaining.	, hereby resign as a	(2.1.0)	
of this limited lial resignation in wr	bility company and affirm th	e limited liability compa	my has been notifie	ed of my
Signature of Resi	igning Member, Managing N	lember or Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			O7 AUG 14
				X