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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Perko Media, LLC (Name of Limited Liability Company)	
The enclosed member, managing member or manager resignation and fee(s) are subfiling.	omitted for
Please return all correspondence concerning this matter to:	
Richelle Koberg (Contact Person)	
Perko Media (Firm/Company)	
851 Hobson St.	
(Address)	
City/State and Zip Code)	2013 FACH
For further information concerning this matter, please call:	NOV 2:
Richelle at (407) 251-1421 (Name of Contact Person) (Area Code & Daytime Telephone No.	MAX ON I
(Name of Contact Person) (Area Code & Daytime Telephone Nu	
Enclosed please find a check made payable to the Florida Department of State for: 2 \$25 Filing Fee \$55 Filing Fee & Certified Copy	3 母 0
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS Registration Section Division of Corporatio P.O. Box 6327 Tallahassee, Florida 32301	ns

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	imited liability company as it PerKo Medic		the Florida Dep	artment	t
	lity company was organized u	nder the laws of:			
	ment/registration number of the 10005 6663 The Perrero me of Person Resigning)		() > = = = = = = = = = = = = = = = = = = =	2013 NOV 250 PM	ber
of this limited liab resignation in writ	ility company and affirm the ling.	imited liability company h			
	ning Member, Managing Men \$25.00 (Required) \$30.00 (Optional)	nber or Manager			