## 462000000

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**EXAMINER** 



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DIVISION OF CORPORATION

## **COVER LETTER**

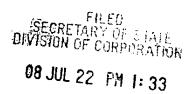
Division of Corporations
SUBJECT: SUNSHINE PILOT, LLC. (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
ASHER CIC (Contact Person)
(Firm/Company)
20040 GULF BLVD #202 (Address)
[Address]  [Address]  [City/State and Zip Code]
For further information concerning this matter, please call:
(Name of Contact Person) at (727) 743 - 4648.  (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$ Certified Copy
STREET/COURIER ADDRESS: MAILING ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

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

1. The name of the limited liability company as it appears on the records of the Florida Department
of State is: SUNSHINE PILOT, LLC
•
2. This limited liability company was organized under the laws of:
FLORIDA.
3. The Florida document/registration number of this limited liability company is:
4. I, A SHER (-), hereby resign as a MANA OER (Print Name of Person Resigning) (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
Manhun ful
Signature of Resigning Member, Managing Member or Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)