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

| TO: Registration Section Division of Corporations  |   |
|--|---|
| SUBJECT: ET, LLC.  | (Name of Limited Liability Company)   |
| The enclosed member, managing filing.  | member or manager resignation and fee(s) are submitted for  |
| Please return all correspondence   | concerning this matter to:  |
| Jody B. McDonald   |   |
| (Contact Person  | on)   |
| ET, LLC.   |   |
| (Firm/Compa  | ny)   |
| 2125 Garnet Court  |   |
| (Address)  | ·   |
| Merritt Island, FL 32953   |   |
| (City/State and Zi   | p Code)   |
| For further information concerni   | ng this matter, please call:  |
| Jody B. McDonald   | at ( 321 ) 482-2415   |
| (Name of Contact Person  | n) (Area Code & Daytime Telephone Number)   |
| Enclosed please find a check made \$\sqrt{25}\$ Filing Fee   | de payable to the Florida Department of State for:  \$55 Filing Fee &  Certified Copy                   |
| STREET/COURIER ADDRES 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

|  |                                    | s it appears on the records  | of the Florida Department |
|--|------------------------------------|------------------------------|---------------------------|
| of State is: ET, I                         | LLC.                               |                              | ·                         |
| 2. This limited liabil State of Flor       | ity company was organize<br>rida   | d under the laws of:         |                           |
| 3. The Florida docum<br>L07000649          | nent/registration number o         | f this limited liability com | pany is:                  |
| 4. I, Enrique Diaz                         |                                    | , hereby resign as a         | Manager                   |
| (Print Nat                                 | me of Person Resigning)            |                              | (Print Title)             |
| of this limited liabi resignation in writi | lity company and affirm thing.     | ne limited liability compan  | y has been notified of my |
| Signature of Resignature                   | Enrique<br>ning Member, Managing M | DIA Z<br>Member or Manager   |                           |
| Filing Fee:                                | \$25.00 (Required)                 |                              |                           |

Certified Copy:

\$30.00 (Optional)