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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: TRAVEL CHAMPIONS, 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:
Louis C. Frangione (Contact Person)
Travel Champions, LLC (Firm/Company)
1717 Mapleleaf Blud. (Address) Oldsmar, FL 34677 (City/State and Zin Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Louis C. Frangione at (813) 818-0812 (Name of Contact Person) (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: 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

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1. The name of the limited liability company as it appears on the records of the Florida D	epartn	nent
of State is: TRAVEL CHAMPIONS, LLC		<u> </u>
2. This limited liability company was organized under the laws of: State of Florida.		
3. The Florida document/registration number of this limited liability company is: Fel EIN# 26-0490026.		
4. I, Christopher Piccivico, hereby resign as a Managing (Print Name of Person Resigning) (Print Title	men	nber
of this limited liability company and affirm the limited liability company has been notified resignation in writing.	fied of	my
Charles Piccino 7/26/07 Signature of Resigning Member, Managing Member or Manager	ال 07	SECR DIVISION
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional) Enclosed #55.00	JL 31 PM 3: 46	FILED ETARY OF STATE H OF C ASSIGNATION