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(Requestor's Name)				
- (Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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12 JAH -9 PH 4: 05

B. BOSTICK
JAN **19**-2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Motion4U LLC		
(Name of Limited Liability Com	pany)	
The enclosed member, managing member or manager resign filing.	nation and fee(s) are submitted for	
Please return all correspondence concerning this matter to:		
Alex Furer		
(Contact Person)		
(Firm/Company)		
(Tith/Company)		
7912 Lake Waunatta Dr	12.	
(Address)		* **
Winter Park, FL, 32792	100	
(City/State and Zip Code)		
For further information concerning this matter, please call:	9 PA 4: 05 SECTIORIO	
Alex Furer at (321	972 3002	
(Name of Contact Person) (Area Code &	& Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida De \$25 Filing Fee \$55	epartment of State for: 55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
	Registration Section	
	Division of Corporations	
•	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Fallahassee, 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 of State is: Mo		appears on the records of the Flor	rida Department
2. This limited liab	ility company was organized ui orida	nder the laws of:	
3. The Florida docu L07000082		is limited liability company is:	
4. I, Alex Furer		, hereby resign as a Manage	er
(Print Name of Person Resigning)		(Print Title)	
of this limited lial resignation in wr	· ·	imited liability company has been	notified of my
Signature of Resi Filing Fee: Certified Copy:	gning Member, Managing Men \$25.00 (Required) \$30.00 (Optional)	nber or Manager	12 JAN -9 PH 4: C