

W1 000094005

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

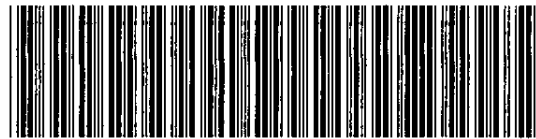
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W1-96005  
Q 12-30



November 27, 2007

VIA CERTIFIED MAIL  
Article No. 7005 0390 0005 4783 1130

Division of Corporations  
2661 Executive Center Circle  
Clifton Building  
Tallahassee, FL 32301

Subject: Change of Managing Member  
Ref. #1.6

DEAR SIR OR MADAM:

This letter is to confirm the changes to the Managing Members of Four Forty Five, LLC.

Enclosed:

- Check #1002 in the amount of \$55.00; Filing Fee of (\$25.00) and a Certified Copy (\$30.00).
- Resignation of Member Form

Sincerely,

Christopher L. Callegari  
Managing Member

CLC:jw  
1.6-L-MemChng-07112clc

Enclosures: · As stated above

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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: Four Forty Five, 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:  
L07000096005

4. I, Dan Vipperman III, hereby resign as a Managing Member  
*(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.

 MGRM Chris L. Callegari  
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

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TALLAHASSEE, FLORIDA