LONDOINADI

| | (Requestor's Name) | | | |
|------------------------|-----------------------|-----------|--|--|
| | | | | |
| | | | | |
| | (Address) | | | |
| | | | | |
| | | | | |
| • | (Address) | | | |
| | | | | |
| | | | | |
| | (City/State/Zip/Phone | e #) | | |
| | | | | |
| PICK-UF | ⊃ | MAIL | | |
| | _ | _ | | |
| • | | • | | |
| (Business Entity Name) | | | | |
| | (Duomood Emily Man | , | | |
| | | | | |
| | (Document Number) | | | |
| , | | | | |
| | | | | |
| | | | | |
| Certified Copies | Certificates | of Status | | |

Special Instructions to Filing Officer:

L. SELLERS

AUG 252008

EXAMINER

Office Use Only



300134515443

08/22/08--01034--020 **75.00

VECHT WITH STATE



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 |
|--------------------------------|----------------------------|------------------------------|---------------------------|
| | ty company was organized | | |
| 3. The Florida docum | nent/registration number o | f this limited liability com | pany is: |
| LO 700 | 0 111 901 | | |
| | | , hereby resign as a _ | SOLE MBR (Print Title) |
| | lity company and affirm th | ne limited liability compan | |
| <u> </u> | I Mark | <u></u> | |
| Signature of Resign | ning Member, Managing N | Member or Manager | |
| Filing Fee: Certified Copy: | | | |
| | | | · 📇 🔔 |

CR2E079 (5/06)

08 AUG 22 AM 8: 16