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SECRETARY OF STATE OIVISION OF CORPORATIONS

COVER LETTER

TO:	O: Registration Section Division of Corporations					
	Divis	ion of C	orporations	S		
SUBJ	ECT:	CAVL	MARK	ETING, L		
				(Name of Lim	ited Liability Co	ompany)
The er filing.		i membe	r, managin	g member or	manager resi	gnation and fee(s) are submitted for
Please	return	all corre	spondence	concerning	this matter to	:
LAR	RY J	ONES				
			(Contact Per	son)		_
	······································	-	(Firm/Compa	any)		_
5377	7 ASH	HTON	COURT	-		_
			(Address)			
SAR	ASO	TA, FL	. 34233	,		
		(C	ty/State and Z	Zip Code)		_
For fu	rther in	nformatic	n concerni	ing this matt	er, please call	:
LAR	RY J	ONES			at (941	9215511
	(Na	ame of Co	ntact Perso	n)		& Daytime Telephone Number)
Enclos	sed ple		theck ma			Department of State for: \$55 Filing Fee & Certified Copy
Regist	ration	OURIER Section Corporation	ADDRES	SS:		MAILING ADDRESS: Registration Section Division of Corporations
Clifton	n Build	ing				P.O. Box 6327
		ve Cente				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

1. The name of the limited liability company as it a of State is: CAVU MARKETING, LLC	appears on the records of the Florida Department
0.000	
2. This limited liability company was organized un FLORIDA	der the laws of:
3. The Florida document/registration number of the L07000120692	is limited liability company is:
4. I, LARRY JONES	, hereby resign as a MGRM
(Print Name of Person Resigning)	(Print Title)
of this limited liability company and affirm the li resignation in writing	mited liability company has been notified of my
19/Non	
Signature of Resigning Member, Managing Mem	nber or Manager
•	· 10

\$25.00 (Required) \$30.00 (Optional) DIVISION OF CORPORATION

CR2E079 (5/06)

Filing Fee: Certified Copy: