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SECNELARY OF STATE

ORIGINAL SECTION OF STATE

OF

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Gilliam & Gilliam, LL	
(Name of	Limited Liability Company)
The enclosed member, managing membe filing.	er or manager resignation and fee(s) are submitted f
Please return all correspondence concern	ing this matter to:
Martin C. Gilliam	•
(Contact Person)	
Gilliam & Gilliam, LLC	
(Firm/Company)	
18800 N.W. 2nd Ave., STE 12	25
(Address)	of appears a visitalizate.
Miami Gardens, FL 33169	MENT BARKSON - LANGE OF THE FORM
(City/State and Zip Code)	
For further information concerning this m	natter, please call:
Martin C. Gilliam	at (305) 770-2733
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payab	ole to the Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida-32301 CR2E079 (5/06)	

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SEUNETARY OF STATE FALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company as i am & Gilliam, LLC	it appears on the records of the Florida Department
2. This limited liabi	lity company was organized	under the laws of:
3. The Florida docu 	-	this limited liability company is:
4. I, Virginia Wo	olf Gilliam ame of Person Resigning)	, hereby resign as a <u>managing member</u> (Print Title)
of this limited liab resignation in wri		limited liability company has been notified of my
Signature of Resi	ning Member, Managing Me	ember or Manager
Filing Fee:	\$25.00 (Required)	