006107

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	·	
Special Instructions to	Filing Officer:	
CPOOLST MISSIAN .	· imig cinicol.	
Honoud		

Office Use Only

G. MCLEOD

APR 2 8 2008

EXAMINER



400125000354

04/25/08--01038--019 **25.00

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	•	TON GROUP, LLC Limited Liability Company)
The e		r or manager resignation and fee(s) are submitted for
Please	e return all correspondence concerni	ing this matter to:
	JOHN PEZZ (Contact Person)	-/NO
	TIBURON G-ROD (Firm/Company)	if, uc
	2 870 TRADE WAY FO	UZ #108/PMB 315
Bo	NITA SARINGS, FL (City/State and Zip Code)	34135
For fu	arther information concerning this n	natter, please call:
	TOHN PEZZINO (Name of Contact Person)	at (239) 591 3246 (Area Code & Daytime Telephone Number)
Enclo	sed please find a check made payab \$25 Filing Fee	le to the Florida Department of State for: \$55 Filing Fee & Certified Copy
	EET/COURIER ADDRESS:	MAILING ADDRESS:
_	tration Section	Registration Section
	ion of Corporations	Division of Corporations P.O. Box 6327
	n Building Executive Center Circle	Tallahassee, Florida 32314
Z001	LACCULIAC COLLOS CITOR	1 4,141143500, 1 101144 52514

CR2E079 (5/06)

Tallahassee, Florida 32301

FILED SECRETARY OF STATE DIVISION OF CORPORATION



08 APR 25 PM 3: 20

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 l	limited liability company as it appears on the records of the Florida Department
of State is:	TIBURON GROUP LLC
2. This limited liabi	lity company was organized under the laws of:
3. The Florida docu	ment/registration number of this limited liability company is:
	000006107
4. I, STUART (Print Na	H. Meni Gomer / hereby resign as a Manager Menber with Menber (Print Title)
of this limited liab resignation in writ	ility company and affirm the limited liability company has been notified of my ting.
Signature of Resig	gning Membel, Managing Member or Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)