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(Ві	usiness Entity Nam	ne)
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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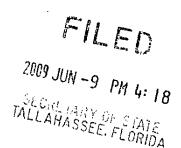
06/08/09--01007--023 **25.00

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ISC G	2000 LLC ne of Limited Liability Company)
The enclosed member, managing me filing.	ember or manager resignation and fee(s) are submitted for
Please return all correspondence con	cerning this matter to:
Richard F. Crute (Contact Person)	<u></u>
ISC Group LLC (Firm/Company)	<u>-</u>
PO Boy 566 711 (Address)	<u> </u>
Minni FL. 33 (City/State and Zip Co	256 ode)
For further information concerning t	his matter, please call:
Same AS About (Name of Contact Person)	at (954) 816 -0303 (Area Code & Daytime Telephone Number)
Enclosed please find a check made p \$25 Filing Fee	payable to the Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 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 of State is:	limited liability company as it appears on the records of the Florida Department ISC MROO LLC.
2. This limited liabi	lity company was organized under the laws of:
	ment/registration number of this limited liability company is:
4. I, FRANK (Print No.	ARGULD, JR, hereby resign as a MGRM (Print Title)
of this limited liab	oility company and affirm the limited liability company has been notified of my ting.
Signature of Res	grang Member, Managing Member or Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)