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PILED STATE OF CORPORATIONS OF CORPORATIONS

J. BRYAN

AUG 1 2 2008

**EXAMINER** 

## **COVER LETTER**

TO:	_	stration Section sion of Corporations			
SUBJ	ECT:	TEAM MOTIVATED, L	LC nited Liability Co.	mnanu)	-
		(Name of Lin	med Liability Co.	mpany)	
The er filing.	nclosed	I member, managing member o	r manager resig	gnation and fee(s) are submitted	i for
Please	return	all correspondence concerning	this matter to:		
BLA	KE N	MANLEY		_	
		(Contact Person)	· · ·	-	
TEA	м мо	OTIVATED, LLC	_	_	80 SINIC
		(Firm/Company)			ALC OX
320	S FL	AMINGO RD, SUITE 3	44	_	08 AUG 11 PH 2: 42
		(Address)			7
PEM	BRC	KE PINES, FL 33027			2: 42
	•	(City/State and Zip Code)	· · · · ·	<del></del>	ψ
For fu	rther ir	nformation concerning this matt	er, please call:		
BLA	KE M	IANLEY	_at (954	881-0353	
	(N	ame of Contact Person)	(Area Code	& Daytime Telephone Number)	
Enclos	sed ple	ase find a check made payable of \$25 Filing Fee		Department of State for: \$55 Filing Fee & Certified Copy	
		OURIER ADDRESS:		MAILING ADDRESS:	
		Section		Registration Section	
		Corporations		Division of Corporations	
Clifton		ing ve Center Circle		P.O. Box 6327	
		Florida 32301		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

	limited liability company as it AM MOTIVATED, LLC		e Florida Department
2. This limited liab FLORIDA	ility company was organized u	nder the laws of:	08 AUG 11 PM 2: 42
3. The Florida doci	ument/registration number of th	nis limited liability company	is: PH 2:1
4. I, JESSICA		, hereby resign as a MG	RM
(Print N	ame of Person Resigning)		(Print Title)
resignation in wr	pility company and affirm the liting.  CO C	<u> </u>	been notified of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		·

CR2E079 (5/06)