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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

MAY 15 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MULTIPLE STREAMS, Lhc	
(Name of Limited Liability Company)	
The enclosed member, managing member or manager resignation and filing.	I fee(s) are submitted for
Please return all correspondence concerning this matter to:	
Angela Lewis	
(Contact Person)	
MULTIPLE STREAMS LLC	
(Firm/Company)	
12945 Generale Blook Boding 1 SVITE	8
(Address)	Z00 SE SE
Largo +L 33778	EL 2009 MAY 14 SECRETARY ALLAHASSE
(City/State and Zip Code)	AR)
For further information concerning this matter, please call:	LAJ CO. Description
Angela Lewis at (727, 234	FLORDE D
(Name of Contact Person) (Area Code & Daytime	
Enclosed please find a check made payable to the Florida Department \$25 Filing Fee \$55 Filing Certifie	Fee &
STREET/COURIER ADDRESS: MAILIN	G ADDRESS:
•	ion Section
<u> -</u>	of Corporations
Clifton Building P.O. Box 2661 Executive Center Circle Tallahasse	ee, Florida 32314
Tallahassee, Florida 32301	00, 1 1011uu 32317

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	n the records of the	Florida Depa	artment 	
ny was organized under the l	aws of:			
	liability company	is:		
do, hereb	y resign as a	SR (Print Title)		
	bility company has	been notified SECRETAR		ż
(Required)	anager	Y OF STATE SEE, FLORIDA	WID: SI	•
	stration number of this limited tration number of this limited tration number of this limited makesigning) any and affirm the limited liab	stration number of this limited liability company tration number of this limited liability company n Resigning) any and affirm the limited liability company has any and affirm the limited liability company has any and affirm the limited liability company has any and affirm the limited liability company has	tration number of this limited liability company is: Solution number of this limited liability company is: Solution number of this limited liability company is: Solution number of this limited liability company is: Solution number of this limited liability company is: Solution number of this limited liability company is: Solution number of this limited liability company is: Solution number of this limited liability company is: Solution number of this limited liability company is: Solution number of this limited liability company is: Solution number of this limited liability company is: Solution number of this limited liability company is: Solution number of this limited liability company is: Solution number of this limited liability company is: Solution number of this limited liability company is: Solution number of this limited liability company is: Solution number of this limited liability company has been notified liability liabilit	tration number of this limited liability company is: 5 AO , hereby resign as a WGR (Print Title) any and affirm the limited liability company has been notified of my and affirm the limited liability company has been notified of my aber, Managing Member or Manager (Required)