## L08000037046

•
(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Business Entity Name)
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08 AUG 25 PM 4: 27

J. BRYAN

AUG 2 6 2008

**EXAMINER** 

## **COVER LETTER**

Division of Corporations			
SUBJECT: Delta Oil Enterprises, LLC			
(Name of Limited Liability Co	mpany)		
The enclosed member, managing member or manager resigning.	gnation and fee(s) are submitted fo	or	
Please return all correspondence concerning this matter to	:		
Paul Mosbey		_	دې
(Contact Person)	-	08 AUG 25	OIVISION OF CURPURATIONS
Delta Oil Enterprises, LLC	<del>_</del>	IG 25	N OF
(Firm/Company)		3	Sec. 1
5042 Maple Drive		t: 27	Z
(Address)	<b>-</b>	72	CRU
Pleasant Hill, IA 50327	_		
(City/State and Zip Code)			
For further information concerning this matter, please call:	:		
Paul Mosbey at ( 641	799-0884		
(Name of Contact Person) (Area Code	e & Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida last street \$25 Filing Fee	Department of State for: \$55 Filing Fee & Certified Copy		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section Division of Corporations		
Division of Corporations Clifton Building	P.O. Box 6327		
2661 Executive Center Circle	Tallahassee, Florida 32314		
Tallahassee, Florida 32301	,		

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: De	limited liability company as elta Oil Enterprises, LL	it appears on the records	s of the Florida De	partmer 	ıt
2. This limited liab	ility company was organized	under the laws of:		08 AUG 25	CIVISION OF CORPORALIUMS
3. The Florida doct	ument/registration number of	this limited liability con	npany is:	PH 4: 27	RPORALIUMS
<sub>4. I,</sub> Ron Elder		, hereby resign as a	Manager		
(Print N	ame of Person Resigning)		(Print Title)		
of this limited lia resignation in wr	bility company and affirm the iting.	limited liability compa	ny has been notifie	ed of my	/
Signature of Res	gning Member, Managing M	ember or Manager			
Filing Fee:	\$25.00 (Required)				
Certified Copy:	\$30.00 (Optional)				