## #108000052097

(Re	equestor's Name)				
(Ac	ddress)	we			
(Ac	ddress)				
(Ci	ty/State/Zip/Phone	e #)			
PICK-UP	MAIT	MAIL.			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to Filing Officer:					
	,				
		1			

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MAR -7 PH 4: 43

SECRETARY OF STATE

ALL AHASSEE, FLORIDA

K. SALY EXAMINER MAR 9 2011

## **COVER LETTER**

	Registration Section Division of Corporations	
SUBJE	CT: Aussieapples Finance L	LC ad Liability Company)
	(Name of Limite	ed Liability Company)
The enc	closed member, managing member or n	nanager resignation and fee(s) are submitted for
Please r	eturn all correspondence concerning th	is matter to:
Walte	er J. Stanton III	
	(Contact Person)	
Carne	ey Stanton P.A.	
	(Firm/Company)	
4000	Ponce De Leon Boulevard, s	suite 470_
	(Address)	
Coral	Gables, Florida 33146	
-	(City/State and Zip Code)	<del></del>
For furtl	her information concerning this matter	, please call:
Walte	r J. Stanton III	at ( 305 ) 458-5131
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclose	d please find a check made payable to  √ \$25 Filing Fee	the Florida Department of State for:  \$55 Filing Fee & Certified Copy
	T/COURIER ADDRESS:	MAILING ADDRESS: Registration Section
_	of Corporations	Division of Corporations
	Building	P.O. Box 6327
	secutive Center Circle see, Florida 32301	Tallahassee, Florida 32314

CR2E079 (5/06)



FILED 11 MAR -7 PM 4: 43 SECRETARY OF STATE TALLAHASSEE, FLORIDA

## 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 ssieapples Finance Ll	• •	s of the Florida Department
2. This limited liab	ility company was organized	under the laws of:	
3. The Florida doc <u>L08000052</u>	ument/registration number of 2097	this limited liability cor	npany is:
4. I. Attorney S	olutions LLC	, hereby resign as a	Manager
, <del></del>	ame of Person Resigning)	,,	(Print Title)
resignation in wr	bility company and affirm the iting.  Swap SLL C  The two parts to the company and affirm the iting.  Swap SLL C  gning Member, Managing M	icr	ny has been notified of my
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		