## L08000073162

	IS Hwy 19 FT 3764  IState/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				

Office Use Only



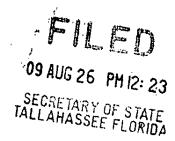
900159762609

08/26/09--01018--005 \*\*25.00

O9 AUG 26 PH 12: 23

N. Gellisam AUG 2 7 2009





## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

_		as it appears on the records of	
2. This limited liabi	lity company was organiz	ed under the laws of:	
FLORIDA		*	•
•	ment/registration number	of this limited liability comp	pany is:
4.1, THOMAS C	BEANARDO  me of Person Resigning)	, hereby resign as a _	MANASER_ (Print Title)
,	ility company and affirm	the limited liability compan	
Signature of Pagi	gning Member, Managing	Member of Manager	
Signature of Resi	Annik meninci, manakink	ividiliber of ividilager	
	\$25.00 (Required) \$30.00 (Optional)		

CR2E079 (5/06)