## 108000874375

(Requestor's Name)				
(Ad	dress)			
- (Address)				
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL		
	siness Entity Nar	ma)		
(Du	Siness Littly Nai	110)		
(Do	cument Number)			
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			
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Office Use Only



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SEGRETARY OF STATE
TALLAHASSEE, FLORING

D. BRUCE

NOV 0 4 2008

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: USA Thurough breds (Name of Limited Liability)	Company)	-	
The enclosed member, managing member or manager refiling.	esignation and fee(s) are submitted	l for	
Please return all correspondence concerning this matter	to:		
haura Paynter (Contact Person)			
USA thoroughreds US	TAL SE	08	
8397 NW 46 57 (Address)	CRETARY LAHASSE	NOV -3	r i L E U
Ocala Fl. 34482 (City/State and Zip Code)	OF STATE, FLORIE	PH 12: 04	רכ
For further information concerning this matter, please ca	all:	<b>1</b>	
	ode & Daytime Telephone Number)	-	
Enclosed please find a check made payable to the Florid	la Department of State for: \$55 Filing Fee & Certified Copy		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 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

		•	•
		s it appears on the records of	the Florida Department
of State is: ()	SA Thoroughbre	205 LC	
2. This limited liab	ility company was organized	d under the laws of:	
Florida			
3. The Florida docu	ument/registration number o	f this limited liability compa	ny is:
<u> </u>	0074375	•	
4. I. Eddie	RUSEY (ame of Person Hesighing)	, hereby resign as a 📈	Langing Member
	, , ,	ne limited liability company h	has been notified of my
resignation in wr	iting		·
& dal	2 Parison		
<u> </u>	Ill in with 3th		
Signature of Resi	gning Member, Managing N	dember or Manager	•
			TAS O
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		<u>₹</u> 6 € _
			AR)
			70 3 F
			PH FLC
			No. No.

CR2E079 (5/06)