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SECRETARY OF STATEMS
DIVISION OF CORPORATIONS

09 MAR 23 AM II: 56

T. HAMPTON

MAR 2 4 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Cou Gallie Wireless L.C. (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Jones T. Frederick (Contact Person)
Eau Gallie Wireless LLC. (Firm/Company)
1268 17. Harbor City Blud (Address)
Melbourne FT 32935 (City/State and Zip Code)
For further information concerning this matter, please call:
Name of Contact Person) at (32/) 984-75/6 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$ Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle

Tallahassee, Florida 32301



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 i	it appears on the records of the Florida	Department	
	ility company was organized	under the laws of:	09 MAR 23	SECRETARY
3. The Florida doct	ument/registration number of	this limited liability company is:	AM 11: 56	RPORATIONS
4.1, Junes (Print N	TreSeick Jame of Person Resigning)	, hereby resign as a Mg/N	<u>Z</u>	
of this limited lia resignation in wr		limited liability company has been no	otified of my	
Signature of Res	igning Member, Managing Me	ember or Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	SUBSCRIBED AND SWORN TO BEFORE THIS THE PAYOF NOTAFY PUBLIC The MANAGEMENT OF THE PUBLIC	ME ON 2-019	
CR2E079 (5/06)	A STATE OF POOL AND A STAT	ON X DURIE X ON OCCUPANT ON OCCUPANT ON OCCUPANT		