L08000099313

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C. LEWIS

MAR 1 2011

EXAMINER

COVER LETTER

CR2E079 (5/06)

TO: Registration Section Division of Corporations	
SUBJECT: Mad Dog Bats, LLC	
(Name of Limite	ed Liability Company)
The enclosed member, managing member or n filing.	nanager resignation and fee(s) are submitted for
Please return all correspondence concerning th	nis matter to:
Regina Steinmuss	
(Contact Person)	
Mad Dog Bats, LLC	
(Firm/Company)	
PO Box 536148	
(Address)	
Orlando, Florida 32853	
(City/State and Zip Code)	
For further information concerning this matter	, please call:
Regina Steinmuss	at (407) 574-8315
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee	the Florida 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



FILED

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SECRETARY OF STATES 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 in ad Dog Bats, LLC	t appears on the records	of the Florida Department
or state is.			
2. This limited liab	ility company was organized t	under the laws of:	
3. The Florida doc <u>L08000099</u>	ument/registration number of t 9313	his limited liability com	pany is:
4. I, Manuel P	erez	, hereby resign as a	MGRM
/	ame of Person Resigning)	<u></u>	(Print Title)
of this limited lia resignation in wr	bility company and affirm the iting.	limited liability compan	y has been notified of my
Signature of Res	gning Member, Managing Me	mber or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		