## L08000117962

(Requ	estor's Name)		
, (Addre	ess)		
(Addre	ess)		
(City/s	State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Busir	ness Entity Nai	me)	
(Docu	ment Number		
Certified Copies	Certificate	s of Status	
Special Instructions to Filing Officer:			
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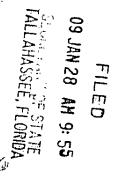
01/28/09--01005--002 \*\*50.00



B. KOHR

JAN 28 2009

**EXAMINER** 





## 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 it ap		of the Florida Department
2. This limited liab	ility company was organized und	er the laws of:	
3. The Florida docu <b>L0800011</b>	ment/registration number of this 7962	limited liability con	npany is:
of this limited liab resignation in wri	ame of Person Resigning) pility company and affirm the lim	nited liability compa	MANAGING MEMBER (Print Title)  ny has been notified of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		