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Office Use Only

G. MCLEOD

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EXAMINER



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SECRETARY OF STATE

COVER LETTER

то:	Registration Section Division of Corporations		*	i I
SUBJ	ECT: Executive Mame of Li	lakket 1 w imited Liability Con	System 1 spany)	ms, LCC
The enfiling.	nclosed member, managing member	or manager resig	nation and fee	(s) are submitted for
Please	return all correspondence concerning	g this matter to:		
Vin	cent Mansolillo (Contact Person)			
	ecutive Markety S	,		
95	10 Chricgram Palms	Circle #	4	· · · · · · · · · · · · · · · · · · ·
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For fu	rther information concerning this ma	tter, please call:		t : t
Vin	(Name of Contact Person)	at (239) (Area Code) ZOC & Daytime Tel	ephone Number)
Enclo	sed please find a check made payable \$25 Filing Fee		Department of S55 Filing Fee Certified,Co	&
Regist Divisi Clifto 2661	CET/COURIER ADDRESS: tration Section on of Corporations n Building Executive Center Circle hassee, Florida 32301	* ************************************	MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

		i		
1. The name of the limited liability company as it	appears on the recor	rds of the F	lorida Departn	nent
	• •	•	-	
of State is: Executive Mark of	in System	13 , 66	<u>- C</u>	— ·
•	`			
2. This limited liability company was organized u	inder the laws of	•		
Florida		•		
1 10121 84	·			
3. The Florida document/registration number of the	his limited liability o	omnany ice		
	ins minica habitity c	ompany is.		
L090000 1225				
Walley Walls and the	* 4	i i		i .
4. I, UNCENT NAPOLEON	, hereby resign as	a Mana	ains More	1556A
(Print Name of Person Resigning)		. (1	Nint Title)	
of this limited liability company and affirm the l	limited liability com	pany has be	en notified of	my
resignation in writing.	· , · · ·	:		
		•		
Museut la Min		E		
Signature of Paciaring Member Managing Me	mber or Manager	•		
Signature of Resigning Member, Managing Me	inder of Manager	i	Z.	
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Fillian Francisco (Parasinal)		i		T
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	•	•	Sp. I	SCALE STATE
continue copy. (350.00 (Optional)			置名	
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