L0900001673

(Re	questor's Name)	
(Ade	dress)	
(Add	dress)	
(/ ta	u1033)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	s of Status
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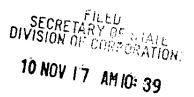
COVER LETTER

TO: Registration Section

CR2E079 (5/06)

and fee(s) are submitted for
3-1983
rtime Telephone Number)
ment of State for:
tified Copy
LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, Florida 32314





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	ERIOR SOLUTIONS	4-U, LLC
2. This limited liab STATE OF	ility company was organized FLORIDA	under the laws of:
3. The Florida docu L09000001	•	this limited liability company is:
4. I, LIBBY VAI	UGHAN ame of Person Resigning)	, hereby resign as a MANAGER MEMBER (Print Title)
resignation in wri		e limited liability company has been notified of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	ember of wanager