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C. LEWIS

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EXAMINER

COVER LETTER

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CR2E079 (5/06)

TO:	Registration Section Division of Corporations	
SUB	JECT: THREE GIRLS AND A GU	JY FARMS, LLC ted Liability Company)
	(Name of Linns	ted Liability Company)
The e		manager resignation and fee(s) are submitted for
Please	e return all correspondence concerning t	his matter to:
<u>C. N</u>	Marie Brevitt-Schoop, Esquire (Contact Person)	
С.	MARIE BREVITT-SCHOOP, P.A.	
	(Firm/Company)	
20	0401 NW 2nd Avenue, Suite 220	
	(Address)	
Mi	iami, Florida 33169	
	(City/State and Zip Code)	
For fu	urther information concerning this matter	r, please call:
<u>C. N</u>	Marie Brevitt-Schoop, Esq.	
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclo	sed please find a check made payable to $\boxed{\mathbf{x}}$ \$25 Filing Fee	the Florida Department of State for: \$55 Filing Fee & Certified Copy
	EET/COURIER ADDRESS:	MAILING ADDRESS:
	tration Section	Registration Section
	ion of Corporations	Division of Corporations
	n Building Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
	nassee, Florida 32301	rananassee, Fiorida 32314





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		•
or state is:	THREE GIRLS AND A	GUY FARMS, LLC	•
2. This limited liab FLORIDA	ility company was organized o	under the laws of:	
		<u></u> -	
L0900003109	iment/registration number of t		
4. I. <u>pamela b.</u> (Print N	WATSON_ ame of Person Resigning)	, hereby resign as a _	MGRM (Print Title)
	pility company and affirm the		
1			
Signature of Resi	gning Member, Managing Me	mber or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		