(Red	questor's Name)				
(Add	dress)				
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EXAMINER



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COVER LETTER

TO:	Registration Section	
	Division of Corporations	
SUBJ	ECT: Body Bronze Products L	
	(Name of Limited	d Liability Company)
The enfiling.		nanager resignation and fee(s) are submitted for
Please	e return all correspondence concerning thi	is matter to:
Lisa	A Perna	
	(Contact Person)	
Body	y Bronze Products LLC	
	(Firm/Company)	
4625	5 Halder Lane Ste. B	
	(Address)	
Orla	ndo, Florida 32814	
	(City/State and Zip Code)	
For fu	rther information concerning this matter,	, please call:
Lisa	A Perna a	at (407) 921-4569 (Area Code & Daytime Telephone Number)
·	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclos	sed please find a check made payable to t	the Florida Department of State for:
	\$25 Filing Fee	\$55 Filing Fee &
	····	Certified Copy
STRE	ET/COURIER ADDRESS:	MAILING ADDRESS:
Regist	tration Section	Registration Section
	on of Corporations	Division of Corporations
	n Building	P.O. Box 6327
	Executive Center Circle	Tallahassee, Florida 32314
i allah	assee, Florida 32301	

CR2E079 (5/06)



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 dy Bronze Products L	it appears on the records of the LC	he Florida Departm	ient —·
2. This limited liab	ility company was organized	under the laws of:		
3. The Florida doc 	-	f this limited liability compan	y is:	
4. I, Crystofer	J. Roberts Jame of Person Resigning)	, hereby resign as a VP	P MGMR (Print Title)	
•	bility company and affirm the	e limited liability company ha	,	my
Signature of Res	gring Member, Managing M	1ember or Manager	10 AUG -2	of the control of the
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		PM 2: 43 OF S MR E, FLORB	The state of the s