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SECRETARY OF STATE
AND ASSESS FOR INC.

D. BRUCE

AUG 3 1 2009

EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: Stage 13 Enterpr (Name of Limited Liability	
The enclosed member, managing member or manager filing.	resignation and fee(s) are submitted for
Please return all correspondence concerning this matte	r to:
An Hardy (Contact Person)	
Stage 13 Peterning Ar	<u>k</u>
253 US 27N (Address)	PIL 09 AUG 28 SECRETARY VLLAHASSE
Sebring # 33870 (dity/state and Zip Code)	PH 12: 38 CF STATE FLORIC
For further information concerning this matter, please	call:
(Name of Contact Person) at Acrea (Area (3 386 9131 Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Flori \$25 Filing Fee	da Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	

Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the of State is:	limited liability company as it	appears on the record	rds of the Florida Department
Flor	ility company was organized u	 	
LO 9000 -4. I, Ahn (Print N	ument/registration number of the WHO S D	, hereby resign as a	a Member (Print Title)
resignation in wr	bility company and affirm the liting. Add agreement to the liting and affirm the liting.	-	pany has been notified of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		FILED 1UG 28 PH 12: 35 AHASSEE, FLORID
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