(Requ	estor's Name)	w
(Addr	ess)	
. (Addr	ess)	
(City/S	State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Busir	ness Entity Na	me)
(Docu	iment Number)
Certified Copies	Certificate	s of Status
Special Instructions to Fil	ling Officer:	
	A. LU	NT

JUN -8 2010

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Intertext, LLC	
(Name of	f Limited Liability Company)
The enclosed member, managing member filing.	er or manager resignation and fee(s) are submitted for
Please return all correspondence concern	ning this matter to:
Byron G Ellison	
(Contact Person)	
	<u> </u>
	ACCEPTANCE AND JUN - 1
(Firm/Company)	<u> </u>
2962 NW 60th St	
(Address)	
E. I. I. E. 00000	
Ft Lauderdale, FL 33309	
(City/State and Zip Code)	
For further information concerning this r	matter, please call:
	, Promot came
Byron Ellison	_{at (} 954 ₎ 582-5256
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
	, ,
	ble to the Florida Department of State for:
\$25 Filing Fee	\$55 Filing Fee &
	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (5/06)



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: Inte	limited liability company as it ap	pears on the records	of the Flor	ida Depa	artmen	t	
2. This limited liabi Florida	lity company was organized und	er the laws of:		ELWINS	2010 JUN -7	FIL	
3. The Florida docu L09000049	ment/registration number of this 9269	limited liability con	npany is:	E. FLORIDA	PM 4: 80	M	
4. I, Byron G Ellison (Print Name of Person Resigning)		, hereby resign as a Managing Member (MGRM					
of this limited liab	ility company and affirm the lim	ited liability compar	ny has been	notified	lofmy		
Signature of Resig	gning Member, Managing Memb	er or Manager					
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)						