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SECRETARY OF STATE
TALL AHASSEE, FLORID

J. BRYAN
AUG 1 8 2009
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Resorts Mass Marketing	
(Name of Limit	ted Liability Company)
The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning t	his matter to:
Brian Smith	
(Contact Person)	SEC FALL
Timeshare Hot Weeks	AUG
(Firm/Company)	SECRETARY OF STATI ALLAHASSEE. FLORI
5959 Westgate Drive Suite #1521	FO THE
(Address)	
Orlando, FL 32835	Dri —
(City/State and Zip Code)	
For further information concerning this matte	r, please call:
Brian Smith	at (407595-6601
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 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

	nited liability company as it appears on the reco	ords of the Flo	orida De	•	nent
	ty company was organized under the laws of:		SECRETARY OF S	09 AUG 17 PM 12: 57	FILED
3. The Florida docum	ent/registration number of this limited liability of the second s	company is:	ORIUL	2:57	
4. I, Brian Micha	els, hereby resign as, hereby resign as	s a 50% C	wner	/ MC	<u>3</u> RM
resignation in writing	ity company and affirm the limited liability company $8/12/69$ uing Member, Managing Member or Manager	npany has bee	en notifi	ed of	my
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)				