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COVER LETTER

TO: Amendment Section Division of Corporations	ON COR
SUBJECT: Dyna werks Long DOCUMENT NUMBER: Log 000 6	<u></u>
	a Limited Liability Company and fee are submitte
Please return all correspondence concerning this m	natter to the following:
Aaron Duncan Name of Person	
Name of Firm/Company	
P.O. Box 147 Address	
Divesties 1990 D Lot ma E-mail address: (to be used for future annual report not	3.21-7.5
For further information concerning this matter, ple	
Aaron Duncan at (386 339 - 0941/ Area Code & Daytime Telephone Number
Enclosed is a check made payable to the Florida D liability company or \$25.00 for an administratively limited liability company.	repartment of State for \$85.00 for an active limited y dissolved, voluntarily dissolved or withdrawn
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



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

_	imited liability company as it appears on the records of the Florida Department Yuawerks LLC.
	oility company was organized under the laws of:
	ument/registration number of this limited liability company is:
4. I, <u>Aaron</u>	Duncan, hereby resign as a Manager (Print Title)
	bility company and affirm the limited liability company has been notified of my
	zan Dan
Signature of Resi	igning Member, Managing Member or Manager
•	\$25.00 (Required) \$30.00 (Optional)