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ALLAHASSEE, FLORID

12/17/10--01007--005 **25.00

J. BRYAN

DEC 2 0 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: TENPLY LL C (Name of Limited Liability Con	npany)	
The enclosed member, managing member or manager resig filing.	nation and fee(s) are submitted for	
Please return all correspondence concerning this matter to:		
GROGORY GLEASON (Contact Person)	- 688 68 68 68 68 68 68 68 68 68 68 68 68	Ď
TEN PLY (Firm/Company)	O DEC 17 PH 1:56 SECRETARY OF STATE SALLAHASSEE, FLORID.	_ []
OUBLIN OHIO 43016 (City/State and Zip Code)	STATE STATE	
(City/State and Zip Code) For further information concerning this matter, please call:	_	
(Name of Contact Person) at (Area Code	286 - 897 6 & Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida D \$25 Filing Fee \$\$	Department of State for: 655 Filing Fee & Certified Copy	
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	
m		

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	limited liability company as it appears on the	records of the Florida Department
of State is:	TENPLY LLC	9
	vility company was organized under the laws of	10 to 1
<u>L096000</u>	ument/registration number of this limited liabil	
4. I, GROGERY (Print)	definition of Person Resigning), hereby resignate of Person Resigning)	gn as a MANAFOL (Print Title)
of this limited lial resignation in wr	bility company and affirm the limited liability of iting.	company has been notified of my
/_/ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	J. Blean	_
Signature of Resi	gning Member, Managing Member or Manage	or
	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	