169000104326

(Req	uestor's Name)	
(Addi	ress)	
(Addi	ress)	
(City/	State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nam	ne)
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D. BRUCE

MAR 2 2 2010

EXAMINER

COVER LETTER

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 limited liability compan of State is: Metrix LLC	y as it appears on the records of the Florida Department
2. This limited liability company was organ all lawful purposes	ized under the laws of:
3. The Florida document/registration number L09000104326	er of this limited liability company is:
4. I, Wendy A Sawyer (Print Name of Person Resigning)	, hereby resign as a Managing Member (Print Title)
of this limited liability company and affirm resignation in writing. Signature of Resigning Member, Managin	m the limited liability company has been notified of my
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	