L09000107355

(Re	questor's Name)			
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone) #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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SECRETARY OF STATE
SECRETARY SEEE, FLORIDA

J. BRYAN

FEB -4 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	•
SUBJECT: OYA, LLC (Name of Limited Liability of	Company)
The enclosed member, managing member or manager refiling.	
Please return all correspondence concerning this matter	to:
ROBERT C. BOYLE (Contact Person)	
(Contact Person)	10 F
(Firm/Company)	FEB-3 PM 1: 34 CRETARY OF STATE LAHASSEE. FLORIE
633 ANBOR LAKE LANE (Address)	PA PA
(Address)	
TAMPA, FL 33602 (City/State and Zip Code)	DM F
(City/State and Zip Code)	,
For further information concerning this matter, please ca	all:
ROBERT BOYLE at 64	ode & Daytime Telephone Number)
(Name of Contact Person) (Area Co	ode & Daytime Telephone Number)
Enclosed please find a check made payable to the Florid \$25 Filing Fee	la Department of State for: \$55 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

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 li		s it appears on the records	of the Florid Department
2. This limited liabili	ity company was organize	ed under the laws of:	-3 PH 1:34
3. The Florida docum	nent/registration number of	of this limited liability com	pany is:
L0960010	7355	·	
4. 1, Robert (Print Na	C'. Bo VLE ne of Person Resigning)	, hereby resign as a _	MANAGING MEMBEX (Print Title)
	lity company and affirm t	the limited liability compan	y has been notified of my
D.Chart	1 ₂		
Signature of Resign	ning Member, Managing	Member or Manager	
Filing Fee:			
Certified Copy:	\$30.00 (Optional)		