L0900008941

(Reque	estor's Name))
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificate	es of Status
Special Instructions to Fili	ing Officer:	

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A. LUNT

JUL 10 2011

EXAMINER



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07/05/12--01005--030 **55.00



COVER LETTER

CR2E079 (5/06)

TO: Registration Section Division of Corporations	
SUBJECT: JMZ Group, LLC	ited Liability Company)
(Iname of Limi	ned Liaotity Company)
The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning to	this matter to:
John A. Maze, III	
(Contact Person)	Tri B
JMZ Group, LLC	
(Firm/Company)	SAN A
1200 Oakley Seaver Drive Suite	203
(Address)	A PRICE OF THE PRI
te.	, Dia
Clermont, FL 34711	
(City/State and Zip Code)	
For further information concerning this matte	er, please call:
John A. Maze, III	at (352) 227-1408
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee	the Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314



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	s of the Florida Department
	Z Group, LLC	11	Ŧ,
	pility company was organized	l under the laws of:	AY OF STATE
3. The Florida doc L0900010	ument/registration number of 8941	f this limited liability con	npany is:
4. I, Frank Dau	ightry	, hereby resign as a	Managing Member (Print Title)
	bility company and affirm the		
Signature of Res	igning Member, Managing M	lember or Manager	
	\$25.00 (Required) \$30.00 (Optional)		