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(Re	questor's Name)
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PICK-UP	WAIT MAIL
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Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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Office Use Only



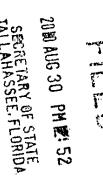
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T. CLINE

AUG 3 1 2010

EXAMINER



20 M AUG 30 PM

Registration Section Divisions of Corporations P.O. Box 6327 Tallahassee, Fl 32314

August 26, 2010

To whom it may concern:

I Keenan L. Paicely, am resigning as manager of Superior Source Unlimited, LLC. I no longer have a 50% stake in the above mentioned company.

Thanks,

Keenan L. Paicely

COVER LETTER

CR2E079 (5/06)

TO: Registration Section Division of Corporations	
SUBJECT: Superior Source Unlimited, L	
	• •
The enclosed member, managing member or manage filing.	is resignation and ree(s) are sublimited for
Please return all correspondence concerning this mat	tter to:
Verlean S. Paicely	
(Contact Person)	
Superior Source Unlimited, LLC	
(Firm/Company)	
5880 Liska Drive	
(Address)	ALL.
Jacksonville, FL 32244	20 m) AUG 30 SECRETARY
(City/State and Zip Code)	m - m
For further information concerning this matter, pleas	요즘 '개'
Verlean S. Paicely at (7	786) 439-6980 : 第 5
(Name of Contact Person) (Are	a Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Flo \$25 Filing Fee	orida 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

	mited liability company as it ap prior Source Unlimited,		of the Florida	a Departme	nt
2. This limited liability Florida	ty company was organized und	ler the laws of:			
3. The Florida docum L10000065	nent/registration number of this	limited liability con	ipany is:	20 節 S 部	
•	ne of Person Resigning)	, hereby resign as a	(Print 🕻	20 B AUG 30	
Leen G	ity company and affirm the liming.			THE STATE	y M
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				