L100000007186

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL .
(Bu	siness Entity Nar	me)
(0-	No contract No.	
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		1

Office Use Only



900185332099

09/30/10--01007--013 **25.00

COVER LETTER

	ation Section of Corporation	as			
SUBJECT: _	Flea	(Name of Limite	d Liability Cor	MICÎ CA mpany)	LLC
The enclosed manner filing.	nember, managir	ng member or m	ıanager resig	gnation and fee	e(s) are submitted for
Please return al	l correspondenc	e concerning th	is matter to:		
Kenn	(Contact Pe	es v s		_	
Flea	Markts (Firm/Com	America pany)	LLC	_	
P.O.	Box (Address	773360	·	_	
(1) O ca/9	(Address (City/State and) <u>34477・</u> Zip Code)	3360	e in the second of the second	7,00 au 1534 (17)
	ormation concern				
Kenne2 (Nam	th Green	on)	at (352)) 291-13 e & Daytime Te	332 elephone Number)
Enclosed please	e find a check m \$25 Filing Fe			Department of \$55 Filing Fee Certified C	: &
Registration Se Division of Cor Clifton Buildin	rporations g c Center Circle			MAILING A Registration Division of C P.O. Box 633 Tallahassee,	Section Corporations
CR2E079 (5/06)					



SECRETARY OF STATE DIVISION OF CORPORATION:

10 SEP 30 AM 11: 42

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company as it appears on the records of the Florida Department Flea Markets America LLC.
	ility company was organized under the laws of:
_	ument/registration number of this limited liability company is:
<u> </u>	0007786
4. I, <u>Judit</u>	Hame of Person Resigning) (Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Signature of Res	igning Member, Managing Member or Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)
z.	
√	

CR2E079 (5/06)