

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JB BANS, LLC.
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

JIM BENNETT
(Contact Person)

JB BANS, LLC
(Firm/Company)

290 BEAR RIDGE CIRCLE UNIT A
(Address)

PALM HARBOR FL. 34683
(City/State and Zip Code)

For further information concerning this matter, please call:

JIM BENNETT at (727) 781-2278
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

\$25 Filing Fee

\$55 Filing Fee &
Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
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 of the Florida Department of State is: JB BANS, LLC.

2. This limited liability company was organized under the laws of:
STATE OF FLORIDA

3. The Florida document/registration number of this limited liability company is:
L10000010443

4. I, BLAIR BULLOCK, hereby resign as a MGRM
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Blair Bullock 12-4-10
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

Resigning 12-4-10 *BB*

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 DEC - 9 AM 10:42