(Re	equestor's Name)	
(Ad	ldress)	
7/4	ldress)	
. (Ad	aress)	
· (Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	A. Lu	JNT
	JUL -8	
	_	
	EXAM	INEH

Office Use Only



900208603199

07/07/11--01043--005 **25.00

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: AUGHTY DUTLO (Name of Limited Liability C	Compáný)
The enclosed member, managing member or manager resfiling.	signation and fee(s) are submitted for
Please return all correspondence concerning this matter to	o:
Judy Fizer (Contact Person)	
Mughty Outlaw (Firm/Company)	BECRETARY LLAHASSE
8530 (VOIASS HOllow Ct.	7 PH RESTA
Santord F1 32771 (City/State and Zip Code)	DA DE
For further information concerning this matter, please cal	
Jamie Southworth at (321) (Name of Contact Person) (Area Coo	de & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida \$25 Filing Fee	Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:

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

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



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 limite of State is:	d liability company as it appears	on the records of the Flo	rida Department	
	ompany was organized under the	laws of:	2011 JUL -7 PL SECRETARY OF FALLAHASSEE.]
3. The Florida document/	registration number of this limite	ed liability company is:	D STATE FLORIDA	ļ
4.1, <u>Janie</u> 5 (Print Name of	Outhwith, here Person Resigning)	by resign as a <u>Ma na</u> (Pri	SIND Momber	_
of this limited liability of resignation in writing.	company and affirm the limited li	ability company has been	n notified of my	
Signature of Resigning	Member, Managing Member or	Manager		
-	5.00 (Required) 0.00 (Optional)			