L100000024320

(Re	(Requestor's Name)					
(Ad	(Address)					
(,					
(Ad	ldress)					
(City/State/Zip/Phone #)						
•						
. PICK-UP	MAIT	MAIL				
•						
(Bu	isiness Entity Nam	e)				
(Do	cument Number)					
Certified Copies	Certificates	of Status				
Special Instructions to	Filing Officer:					





300176342773

04/26/10--01006--012 **25.00



C. LEWIS

APR 2 8 2010

EXAMINER

COVER LETTER

CR2E079 (5/06)

TO:	Registration Section Division of Corporations		
	Division of Corporations		
SUBJ	ECT: AmeriFund Apparel, LLC	С	
	(Name of Limit	ed Liability Cor	mpany)
The er filing.	nclosed member, managing member or r	nanager resig	gnation and fee(s) are submitted for
Please	e return all correspondence concerning the	his matter to:	
Sho	nee Hadlock		
	(Contact Person)		-
Ame	eriFund Apparel, LLC		_
	(Firm/Company)		
1106	65 Gatewood Drive, Suite C10	01	_
	(Address)		
Brac	denton, FL 34211		
	(City/State and Zip Code)		_
For fu	orther information concerning this matter	r, please call:	
Shor	nee Hadlock	at (941	746-8282
	(Name of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclos	sed please find a check made payable to	the Florida I	Department of State for:
	\$25 Filing Fee		\$55 Filing Fee &
	<u></u>		Certified Copy
STRE	EET/COURIER ADDRESS:		MAILING ADDRESS:
Regist	tration Section		Registration Section
	ion of Corporations		Division of Corporations
	n Building		P.O. Box 6327
	Executive Center Circle		Tallahassee, Florida 32314
Tallah	nassee, Florida 32301		



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

FILED

2010 APR 26 PM 8: 89

SECRETARY OF STATE TALLAHASSEE. FLORIDA

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

	limited liability company as eriFund Apparel, LLC		of the Florida Department
2. This limited liab	vility company was organized	l under the laws of:	
3. The Florida doc <u>L1000000</u> 2	ument/registration number of 24320	f this limited liability con	npany is:
4. I, Robert Bla	ackwell	, hereby resign as a	MGRM
	lame of Person Resigning)	· , , , , , , , , , , , , , , , , , , ,	(Print Title)
resignation in wr	bility company and affirm the iting. Make the state of t	4/4/2010	ny has been notified of my
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		