10000024787

156					
	(Requ	estor's Name)		
	(Addre	ess)			
<u> </u>	(Addre	ess)			
	(City/S	State/Zip/Pho	ne #N		
	Onjie	State/Zip/i iio			
PICK-L	JP	☐ WAIT		MAIL	
·			···		
	(Busir	ness Entity Na	ame)		
	(Docu	ment Numbe	<u>r)</u>		
Certified Copies		Certificate	es of Statu	s	
		· ————————————————————————————————————			
Special Instructions to Filing Officer:					
2 ·				ŀ	
				l	
		•			
		•		}	
<u> </u>	· ·				

Office Use Only



500183110555

07/12/10--01018--025 **25.00

FILED
10 JUL 12 AM 9: 42
SECRETARY OF STATE

J. BRYAN

JUL 1 3 2010

EXAMINER

COVER LETTER

	TO: Registration Section Division of Corporations			. 1			
;	SUBJECT: BASEBALL EN	terprises,	LLC.		•	· 	
÷	(Name	of Limited L	iability Company)		•	*
	The second secon			المراجعة المستدين		 	
	The enclosed member, managing men filing.	nder or-man	ager resignatio	on and ree(s	i) are subm	itted for	
	ming.						
	Please return all correspondence conc	erning this r	natter to:				
	Trease retain an eonespendence cone	•		·. j.			
•				·			
	- ACMANAS GUTERIEZ (Contact Person)					٠	
	(Contact Person)					発る	
					ſ		-4
	BASEBALL Enterprises (Firm/Company)	s, LLC.	***		•	題に	-
	(Firm/Company)	<u> </u>		- !		SS N	
			• •			mo z	· [7
	10BOX 10/2	٠				F 3	E
	10 Box 1863 (Address)			Ĩ, •		AM 9: 42 OF STATE EE, FLORID	
	(/sudicas)		- · ·	ľ			•
	i i i i i i i i i i i i i i i i i i i			• • • • • • • • • • • • • • • • • • • •		D	·
	OVZIANDO, FL 3280 (City/State and Zip Cod	٠ (•
	(City/State and Zip Cod	e) -		:	:		
	For further information concerning th	is matter ni	ease call:				
	To further information concerning th	is munor, p	cuso cum.	•			
	An Track Lange		· ¬				
	Armanoo Guherrer	at (Y o 7 Area Code & D	749-0	272		
	(Name of Contact Person)	. (Area Code & D	aytime Tele _l	phone Num	ber)	
	Fueless duless finds about made no		Placida Dana		·		
	Enclosed please find a check made pa \$25 Filing Fee	iyable to the					
	□ \$23 Filling Fee	•		iling Fee & ertified Cor			
	•			cranica Col	у		
	STREET/COURIER ADDRESS:		Ма	ILING AI	DRESS:		
	Registration Section			sistration Se			
٠.	Division of Corporations			ision of Co			
=	Clifton Building			Box 6327	•		
	2661 Executive Center Circle			lahassee, Fl		.4	
	Tallahanna Elasida 20201		•				

CR2E079 (5/06)



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 Naschall Enterpriker		of the Florida Department
			PE 5
2 This limited lieb	oility company was organized	under the laws of	最当
	· ·	mider die laws of.	7
Florid	<u>) </u>	·	SE ~
	•		mo R
2. The Florida doc	ument/registration number of	this limited lishility some	Ty o
	or redition modules gerthenia. FB FP6000	uns minicu natinty comp	oany is: 9: 42
. 1-, + 001	טעט אין שיד		EM. N
4. I, Bria	NH Graham Name of Person Resigning)	, hereby resign as a	1 Mgcm
(Print l	Vame 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
	1/1/1/1		
		· ·	•
Signature of Res	igning Member, Managing M	ember or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Required)		