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C. LEWIS

SEP 1 3 2010

EXAMINER

#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Lifestyle Legacy Group (Name of Limited Liability)	Company)
The enclosed member, managing member or manager refiling.	esignation and fee(s) are submitted for
Please return all correspondence concerning this matter	to:
Rebecca Kelly (Contag Person)	
Self (Firm/Company)	
4213 W. Vasconia St.	
Tampa, F.L 33629 (City/State and Zip Code)	4] PS
For further information concerning this matter, please ca	all:
Rebecca Mary Kelly at (813) (Name of Contact Person) (Area Co	ode & Daytime Telephone Number)
Enclosed please find a check made payable to the Florid \$25 Filing Fee	a Department of State for: \$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

CR2E079 (5/06)



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SECRETARY OF STATE TABLISHASSEE, FLORIDA

#### 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 of State is:	d liability company as it app Style LegaCy Gr	oears on the records of the Flor	ida Department
2. This limited liability co	ompany was organized unde	r the laws of:	
3. The Florida document/:		limited liability company is:	
	•	hereby resign as a <u>Mana9</u> (Printed liability company has been	
	Mary Kelly Member, Managing Membe		
_	5.00 (Required) 0.00 (Optional)		