4000047798

| \$ | (Requestor's Name) |
|----------------------|--------------------------|
| • | (Address) |
| | (Address) |
| <u> </u> | (City/State/Zip/Phone #) |
| PICK-UF | WAIT MAIL |
| - | (Business Entity Name) |
| | |
| | (Document Number) |
| Certified Copies | Certificates of Status |
| Special Instructions | s to Filing Officer: |
| | |
| | |

Office Use Only



500183953555

08/09/10--01010--012 **25.00



D. BRUCE

AUG 10 2010

EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|---|
| SUBJECT: Emerald Coast Technolog | |
| (Name of Limited | Liability Company) |
| The enclosed member, managing member or ma filing. | nager resignation and fee(s) are submitted for |
| Please return all correspondence concerning this | matter to: |
| Wayne A Boyles | |
| (Contact Person) | |
| | • |
| Emerald Coast Technology Solution | ns LLC |
| (Firm/Company) | |
| | 5 ' |
| 410 Cedar Street | こことには、これには、これには、これには、これには、これには、これには、これには、これ |
| (Address) | |
| (, | |
| Destin, FL 32541 | A WAS |
| (City/State and Zip Code) | |
| (Ony/State and Zap Code) | |
| For further information concerning this matter, p | olease call: |
| | - Line - |
| Wayne A Boyles at | <u>850</u> 687 - 7462 |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) |
| | |
| Enclosed please find a check made payable to th | |
| \$25 Filing Fee | \$55 Filing Fee & |
| | Certified Copy |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: |
| Registration Section | Registration Section |
| Division of Corporations | Division of Corporations |
| Clifton Building | P.O. Box 6327 |
| 2661 Executive Center Circle | Tallahassee, Florida 32314 |
| Tallahassee, Florida 32301 | · |

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

| 2. This limited liab Any and Al | ility company wa I Lawful Busi | | nder the lav | vs of: | , | SECRE IN TALLAHA! | TO AUG- |
|--|-----------------------------------|------------------|--------------|-------------|------------|------------------------------|-----------|
| 3. The Florida doc L1000004 | 7798 | number of th | ° | | • • | RY OF SHATE. SSEE FLORIDA | 9 PM 1:41 |
| 4. I, Mitchell L | | | , hereby | resign as a | MGR | | |
| | ame of Person Resig | - | | _ | | int Title) | |
| of this limited lia resignation in wr | | nd affirm the li | imited liabi | lity compa | ny has bee | n notified | d of my |
| MHel | latter | | 2 | : ~+ | | | |
| Signature of Res | igning Member, N | lanaging Mer | nber or Ma | nager | | | |

CR2E079 (5/06)