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J. SAULSBERRY EXAMINER

NOV 5 2010

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: G.H.I.L FCO	ORTOA CCC ed Liability Company)
The enclosed member, managing member or i filing.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning to	his matter to:
WESLEY Wiggins	·
GHIR FLORIDA (ZC ZOIO NO TALLA
4700 Salis Bury Rr	INNOV-4 AMII: 15 LAHASSEE FLORIDA 225
Jacksonville FC 5 (City/State and Zip Code)	3256
For further information concerning this matter	r, please call:
(Name of Contact Person)	at (Q 0 U) (69 3 - (01 U) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	mited liability company as it appears on the records of the LLC.	of the Florida Department
2. This limited liabil	ity company was organized under the laws of:	
3. The Florida docur	nent/registration number of this limited liability comp	pany is:
4. I, William (Print Nat	Ronald Rohn, Jr., hereby resign as a ne of Person Resigning)	MANNAINY PARFACE (Print Title)
of this limited liabi resignation in writ	lity company and affirm the limited liability companging.	y has been notified of my
wis.	11-3-10	4
Signature of Resig	ning Member, Managing Member or Manager	TOW NOW TECHNIS
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	E E E D