## L/0000/19052

(Requestor's Name)
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(Address)
(Address)
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(Document Number)
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TALLAMASSES, PLANDA

011 MAR 22 PH 12:

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Quantum Merche (Name of Limited	ant Sewices, LLC Liability Company)
The enclosed member, managing member or mafiling.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning thi	s matter to:
Stacey M. Stabile (Contact Person)	
(Contact Person)	2011 HAR 22 PH 12: 31
(Firm/Company)	R 22
1081 Holland Drive	である。 
Ç,	
Boca Raton F2 33487 (City/State and Zip Code)	**************************************
For further information concerning this matter,	please call:
Stacey Stabile at (Name of Contact Person)	(561) 961 - 2670 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	he Florida Department of State for:  \$55 Filing Fee &  Certified Copy
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: 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

	the limited liability company as i			epartmen 	it
	liability company was organized to	under the laws of:		2011 MAR 22	and the same of th
	document/registration number of t	·		22 PK 12:	
4.1, Willia (Pri	m KACP nt Name of Person Resigning)	, hereby resign as a _	MGRM (Print Title)		
of this limited resignation in	liability company and affirm the		y has been notifi	led of my	,
Filing Fee:	\$25.00 (Required)				

Certified Copy:

\$30.00 (Optional)