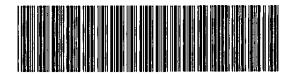


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SEC.ECTRY OF STATE
ALL AHASSEF, FLORIDA

T. HAMPTON

1105 # 1 VON

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: DAYTONA USED AUTO F (Name of Limited L	
The enclosed member, managing member or man filing.	ager resignation and fee(s) are submitted for
Please return all correspondence concerning this r	matter to:
NICK SKARGEE	
(Contact Person)	······································
NICK SKARGEE ACCOUNTING & T	AX INC,
(Firm/Company)	
507 HERBERT ST. STE A	
(Address)	
PORT ORANGE, FL 32129	
(City/State and Zip Code)	· · · · · · · · · · · · · · · · · · ·
For further information concerning this matter, ple	ease call:
NICK SKARGEE at (386 , 788-7264
	Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	Florida 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)



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		s of the Florida I	Depar	tmen	
2. This limited liab	pility company was organized	l under the laws of:				
3. The Florida doc L10000124	ument/registration number of 4270	f this limited liability con	npany is:			
(Print Name of Person Resigning)			, hereby resign as a MGRM (Print Title)			
resignation in wr	bility company and affirm the iting. Igning Member, Managing M.		ny has been noti	fied o	f my	
Signature of Res.	igning intember, managing iv	iember or wanager	∑ ⊗	201		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	,	EUZINKY OF LAHASSEE I	MA OI VON 110	FILED	

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