L11000001951

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SECOLARIASSEE, FLORID

B. BOSTICK
JUL 1 8 2011
EXAMINER

COVER LETTER

Division of Corporations		
SUBJECT: Intellectual Mutual Services, LLC		
(Name of Limited Liability C	ompany)	
The enclosed member, managing member or manager resfiling.	ignation and fee(s) are submitted for	
Please return all correspondence concerning this matter to	o:	
Carly Lambert		
(Contact Person)	_	
Intellectual Mutual Services, LLC		
(Firm/Company)		
3864 Hawkeye Circle	AS I	
(Address)	- Logar	STATE STATE
Sarasota FL 34232	5555	
(City/State and Zip Code)		
For further information concerning this matter, please cal	11 JUL 15 PH 9: 44 SEUNE SEEN FLORID	- -
Carly Lambert at (813	455-0413	
(Name of Contact Person) (Area Coo	le & Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida \$25 Filing Fee	Department of State for: \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314	
Tallahassee, Florida 32301	i andilassee, 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

of State is: Intellectual Mutual Servi	ces, LLC	
This limited liability company was organized Florida	d under the laws of:	ALLAHASS
3. The Florida document/registration number of L11000001951	f this limited liability com	Mc 2
_{4. I.} Todd Breen	, hereby resign as a	Manager **
(Print Name of Person Resigning)	,	(Print Title)
of this limited liability company and affirm the resignation in writing.	e limited liability compar	ny has been notified of my
	Member or Manager	

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)