L11000005577

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
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(Business Entity Name)				
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SECRETARY OF STATE.
ALLAHASSEE EFFORE.

C. LEWIS
FEB -3 2011
EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: GAINESVILLE FUBAR LLC	
(Name of Limited Li	ability Company)
The enclosed member, managing member or mana filing.	ager resignation and fee(s) are submitted for
Please return all correspondence concerning this n	natter to:
MATTHEW MERDIAN	
(Contact Person)	
(Firm/Company)	
225 W UNIVERSITY AVE	
(Address)	
GAINESVILLE FL 32601	
(City/State and Zip Code)	
For further information concerning this matter, ple	ease call:
MATTHEW MERDIAN at (_	407 230-8093
(Name of Contact Person) (A	rea Code & Daytime Telephone Number)
Enclosed please find a check made payable to the	Florida Department of State for:
\$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 32301	Tallahassee, Florida 32314

CR2E079 (5/06)



FILED

2011 FEB -2 PM # 87

SECRETARY OF STATE-TALLAHASSEE, FLORIDA

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 INESVILLE FUBAR L		of the Florida Department
2. This limited liab FLORIDA	ility company was organized	under the laws of:	
3. The Florida docu 110000055	nment/registration number of	this limited liability con	npany is:
4. I, ED CARN	EY ame of Person Resigning)	, hereby resign as a	MEMBER (Print Title)
·	oility company and affirm the	e limited liability compa	ny has been notified of my
Signature of Resi	gning Member, Managing M	ember of Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		