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SESSICINAL OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

Division of Corporations	
SUBJECT: Sunny Side Boot Wo (Name of Limited Liability Co	CKS ompany)
The enclosed member, managing member or manager resifiling.	ignation and fee(s) are submitted for
Please return all correspondence concerning this matter to	· Figure
Tiffay Verville (Contact Person)	-
Sunny Side Boat Works (Firm/Company)	-
PO BOX 3766 (Address)	<u> </u>
Sarasota, FL 3423 C (City/State and Zip Code)	<u>></u>
For further information concerning this matter, please call	:
Tiffony Serville at (603) (Name of Contact Person) (Area Cod	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: 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

TO: Registration Section



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	e limited liability company as it appears on the recounty Side Boat Walks LLC	
	bility company was organized under the laws of:	
3. The Florida doct	cument/registration number of this limited liability	company is:
of this limited lia resignation in wr		
Signature of Res	Signing Member, Managing Member or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	