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## **COVER LETTER**

CR2E079 (5/06)

TO: Registration Section Division of Corporations	
SUBJECT: Oxlater Florida Invistigations & Security, LLC (Name of Limited Liability Company)	
The enclosed member, managing member or manager resignation and fee(s) are submitted filing.	fo ≅
Please return all correspondence concerning this matter to:	
TUCHUL NUTHWIN	178 KI
Greater Floride Investigations + Sicurity LLC (Firm/Company)	
P.D. Box 3811910 (Address)	
Murdal, Florida 33938 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Thomas & Michelle Huffman at (941) Lilel - 1914 (Name of Contact Person) (Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$ Certified Copy	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32301 Tallahassee, Florida 32301	



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1/1	mited liability company a Lr Florida Investiga	as it appears on the records of a Hons + Security, h	f the Florida Departm	nent —·
2. This limited liabili	ity company was organize	ed under the laws of:	2011 JUN 28 SECRETARY ALLAHASSEL	TILE
3. The Florida docum	<del>-</del>	of this limited liability compa	OF STATE	ED
4. I, Thomas E Print Nan	. HUHMAN ne of Person Resigning)	, hereby resign as a/	Manager (Print Title)	
of this limited liabi resignation in writi	<del>-</del>	he limited liability company	has been notified of i	my
Signature of Resign	ning Member, Managing	Member or Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			