4 000028469

(Re	questor's Name)					
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EXCREMANY OF STATE
VALLAMASSEE FLORINA

D. BRUCE
JAN 1 2 2012
EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: Top Gun Options 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);
E. Matthew Buckley (Contact Person)	
Top Gun Pations LLC (Firm/Company)	
1300 N. Federal blung, Svite 202	12 JA
Bora Parton, FL 33432 (City/State and Zip Code)	N-6 PASSEE. F
For further information concerning this matter, please cal	TT- (10
E. Mattlen Buckler at (SCI) (Name of Contact Person) (Area Coo	em 2
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 Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
	

CR2E079 (5/06)

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. The name of the	limited liability company	as it ap	pears on the records of	of the Florid	j∍ a_Depa	artine	nt
of State is:	TOP GUN OPE	005	LLC			JA	T
	oility company was organiz				ARY OF STATE	-6 PM 1:47	
	ument/registration number	of this	limited liability comp	any is:			
<u> </u>	000 28469						
4.1, Brett -	J. Foole Jame of Person Resigning)	· .	hereby resign as a	MGR	•		
of this limited lia resignation in wr	bility company and affirm iting.	the limi	ted liability company	has been n	otified	l of m	У
Signature of Res	igning Member, Managing	Membe	er or Manager				
Filing Fee:	\$25.00 (Required)						
Certified Copy:	\$30.00 (Optional)						