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FYAMMER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 4. ACES, (LC (Name of Limited Liab	pility Company)
(Name of Edition Edition	mily company)
The enclosed member, managing member or managiling.	er resignation and fee(s) are submitted for
Please return all correspondence concerning this ma	atter to:
William Wikan (Contact Person)	
(Contact Person)	
H ACES LLC	
4) ACES, CCC (Firm/Company)	
14962 SE 1077 Ave	
(Address)	
Summer FIEW FL, 3449/ (City/State and Zip Code)	·
For further information concerning this matter, plea	se call:
(Name of Contact Person) at (3	50 456 6301
(Name of Contact Person) (Are	ea Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Fl \$25 Filing Fee	
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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)



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 of State is:			it appears on the records of	of the Florida Department
	•	any was organized	under the laws of:	
	-	stration number of 44380	this limited liability comp	pany is:
of this limited lia resignation in wr	bility compiting.		, hereby resign as a	
Signature of Res	gning Mer	mber, Managing M	lember or Manager	ופ
Filing Fee: Certified Copy:				NUL 11