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AUG 23 2011

EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: TRON WOOD VENTURS D/BA INOON IN (Name of Limited Liability Company)	1+
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to:	
Dick Guesty (Contact Person)	
Thon wood thanks	
2916 Westcheste At	S
OPLANDO FL 32803 (City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Contact Person) Air Ck Gunsky at (467, 256 7619 (Area Code & Daytime Telephone Number)	
(Name of Contact Person) / (Area Code & Daytime Telephone Number)	
Enclosed planting a check made payable to the Flori Department of State for: \$25 Filing Fee	

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Certified Copy

Registration Section Division of Corporations P.O. Box 6327 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 limite of State is:	ed liability company as it app	vears on the records of the F VENTURES	Florida Department	A
2. This limited liability c	ompany was organized unde	r the laws of:	of STATE	
3. The Florida document	registration number of this l	imited liability company is:	:	
1.110 4.1, Rike	00052235	hereby resign as a \mathcal{PC}	. 1	lever Natner
resignation in writing.	company and affirm the limi		een notified of my	
Signature of Resigning	Member, Managing Membe	er or Manager		
-	5.00 (Required) 0.00 (Optional)			