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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: M A Cloba (Name of Limited Liability Con	Management mpany)
The enclosed member, managing member or manager resigning.	gnation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
Chris Pennington (Contact Person)	_
Pennington Law Firm/Company)	_
30) S. Orlando Ave.	_
Winter Park FL. 32789 (City/State and Zip Code)	<del></del>
For further information concerning this matter, please call:	
Chris Pennington at (407) (Name of Contact Person) (Area Code	395 - 4111 e & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida l	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
Tallahassee, Florida 32301	

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

2. This limited liability company was organized under the laws of:  Lorida  3. The Florida document/registration number of this limited liability company is:  L11000073456	
4. I, HATON HOVERON, hereby resign as a MgrM (Print Name of Resigning) (Print Title)	
of this limited liability company and affirm the limited liability company has been notified o resignation in writing.	`my
Signature of Resigning Member, Managing Member or Manager	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	