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Special Instructions to	Filing Officer:	
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K. SALY EXAMINER SEP 1 4 2011

COVER LETTER

for

Tallahassee, Florida 32314

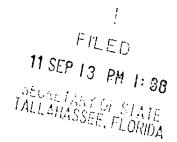
Division of Corporations
SUBJECT: Hatware Headware of Horida LCC (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted filing.
Please return, all correspondence concerning this matter to:
Contact Person)
Hestware Headware (Firm/Company)
1705 N. S Jenace (Address)
Lake Worth, FL 33480 (City/State and Zip Code)
For further information concerning this matter, please call:
Name of Contact Person) (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 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

CR2E079 (5/06)

2661 Executive Center Circle

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 of State is:	limited liability company as it appears on the records of the Florida Department Heatware of Florida LLC.
2. This limited liab	ility company was organized under the laws of:
	iment/registration number of this limited liability company is:
4. I,	ame of Person Resigning), hereby resign as a Managing Member (Print Title)
of this limited liab	pility company and affirm the limited liability company has been notified of my sting.
Şignature of Resi	gning Member, Managing Member or Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)