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SECRETARY OF STATE

COVER LETTER

TO:	Registration Section
	Division of Corporations

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

For further information concerning this matter, please call:

Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee &

\$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)



FILED

2013 JUN -5 PN 12: 40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	nited liability company as it appears on the records of the Florida Department
of State is:	Twin J Holdings 2CC
or own	, , , , , , , , , , , , , , , , , , , ,
2. This limited liabili	ty company was organized under the laws of:
Flor	LIDA
3. The Florida docum	ent/registration number of this limited liability company is:
	10000 99724
4. I, <u>Jorg</u> (Print Nam	e of Person Resigning), hereby resign as a MemBER (Print Title)
of this limited liabil resignation in writing	ity company and affirm the limited liability company has been notified of my
loge le	fg-b
Signature of Resign	ing Member, Managing Member or Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)