L110000108117

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
, and the second					

Office Use Only



200242227862

12/19/12--01027--007 **55.00

2012 DEC 19 PM 3: 03

C. LEWIS

DEC 2 0 2012

EXAMINER

COVER LETTER

TO: Registration Section **Division of Corporations**

TRI-STAR LEADERSHIP ESP, LLC

(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to:

Tonya A. Deal				
(Contact Person)				
(Firm/Company)				
5096 Northern Lights Drive				
(Address)				
Greenacres, FL 33463				

For further information concerning this matter, please call:

Tonya A. Deal (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 ■ \$55 Filing Fee &

Certified Copy

STREET/COURIER ADDRESS:

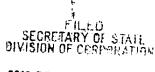
Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)





2012 DEC 19 PM 3: 03

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as it a -STAR LEADERSHIP ESI	-	ida Department
2. This limited liab Florida	ility company was organized und	ler the laws of: 	
3. The Florida docu L110001081	ment/registration number of this	s limited liability company is:	
4. I, Tonya A. Deal		, hereby resign as a MGRM	
(Print Name of Person Resigning)		(Pri	nt Title)
of this limited lial resignation in wri	pility company and affirm the lir	nited liability company has been)	notified of my
Signature of Resi	gning Member, Managing Mem	ber or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		