

L110000127987

(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:

Office Use Only

**B. MCLEOD**  
MAR 13 2012  
**EXAMINER**



500224176905

03/12/12--01002--025 \*\*25.00

FILED  
12 MAR 12 PM 1:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:**                     TGMW, 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:

                    MICHAEL J. WICK                      
(Contact Person)

                    TRION 92, LLC                      
(Firm/Company)

                    578 WASHINGTON BLVD. # 909                      
(Address)

                    MARINA DEL RAY CA 90292                      
(City/State and Zip Code)

For further information concerning this matter, please call:

                    MICHAEL J. WICK                     at (           424           )           209-1600            
(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

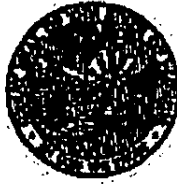
\$55 Filing Fee &  
Certified Copy

**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



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 limited liability company as it appears on the records of the Florida Department of State is: TGMN, LLC

2. This limited liability company was organized under the laws of:  
FLORIDA

3. The Florida document/registration number of this limited liability company is:  
L11 000127987

4. I, TOM GREENEY, hereby resign as a MGMM  
*(Print Name of Person Resigning)* *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

x Tom Greeneey  
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

FILED  
12 MAR 12 PM 1:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA