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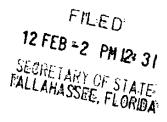
SALLANLYSSEE: FLORIDA

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## **COVER LETTER**

	gistration Section issue of Corporations					
a	. Gloria J. Stollsteimer	II.C				
SUBJECT		(Name of Limited Liability Company)				
The enclose filing.	ed member, managing member	or manager resignation and fee(s) are submitted for				
Please retur	rn all correspondence concernin	g this matter to:				
Peter J.	Brevorka, Esq.					
<u> </u>	(Contact Person)					
Peter J.	Brevorka, P.C.					
<del></del>	(Firm/Company)					
4476 Ma	ain Street, Suite 108					
1118 May 18						
Amherst	, New York 14221					
	(City/State and Zip Code)					
For further	information concerning this ma	tter, please call:				
: Peter J.	Brevorka	<sub>at (</sub> 716 <sub>)</sub> 332-3740				
(1)	Name of Contact Person)	(Area Code & Daytime Telephone Number)				
Enclosed pl	ease find a check made payable	to the Florida Department of State for:				
•	\$25 Filing Fee	\$55 Filing Fee &				
		Certified Copy				
STREET/C	COURIER ADDRESS:	MAILING ADDRESS:				
Registration		Registration Section				
	Corporations	Division of Corporations				
Clifton Buil		P.O. Box 6327				
	tive Center Circle	Tallahassee, Florida 32314				
ı allahassec,	, Florida 32301	,				





## 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 oria J. Stollsteimer LL		s of the Florida Department
2. This limited liab	vility company was organized	under the laws of:	
3. The Florida doc L11000142	ument/registration number of 2005	this limited liability con	npany is:
<sub>4. I,</sub> Gloria J. S	itollsteimer	, hereby resign as a	Manager
(Print N	ame of Person Resigning)		(Print Title)
of this limited lia resignation in wr	bility company and affirm the iting.	e limited liability compa	ny has been notified of my
Deres 1	. Stollsteen	سے	
Signature of Resi	gning Member, Managing M	ember or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		