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(City/State/Zip/Phone #)		
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K. SALY EXAMINER DEC 1 1 2012

..Registration Section TO: **Division of Corporations** SUBJECT: A Butcher Shoppe & a bit more 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: Terra Prest (Contact Person) (Firm/Company) 18324 Guardian Circle (Address) Boca Raton FL 33496 (City/State and Zip Code) For further information concerning this matter, please call: Terra Prest (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 &

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



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SECNITARY 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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: A Butcher Shoppe & a bit more LLC		
2. This limited liability company was organized un Florida	nder the laws of:	
3. The Florida document/registration number of th L12000030704	is limited liability company is:	
_{4. I.} Terra Prest	, hereby resign as a Managing Member	
(Print Name of Person Resigning)	(Print Title)	
of this limited liability company and affirm the linesignation in writing.	imited liability company has been notified of my	
Signature of Resigning Member, Managing Mem	nber or Manager	

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee:

Certified Copy: