

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

G. MCLEOD

JUL - 6 2012

EXAMINER



900236937589

06/29/12--01023--010 **25.00

12 JUN 29 PM 3: 48

DECRETARY OF STATE
ALLAHASSEE FLORIE



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 l	imited liability company a	s it appears on the rec	cords of the Flore	orida Dep , <u>LCC</u>	oartme	ent _·
2. This limited liabil	ity company was organize	d under the laws of:				
3. The Florida documents 2 12 0000	ment/registration number of \$4.734	of this limited liability	company is:			
4. I, MAL (Print Na	Thompson Sr. me of Person Resigning)	, hereby resign	as a ME	rint Title)	v <u></u>	_
of this limited liab resignation in writ	ility company and affirm thing.	he limited liability co	mpany has bee	en notifie	d of n	ny
Mathanica Signature of Resig	ming Member, Managing	Member or Manager				
÷ ·	\$25.00 (Required) \$30.00 (Optional)			TALLAHAS	12 JUN 2	**************************************

CR2E079 (5/06)