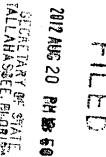
(Requestor's Name)			
(Address)			
(Audiess)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(December 1)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
A			
A. LUNT			
AUG <b>23</b> 2011			
EXAMINER			

Office Use Only

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Boats & Hulls, A	LC ility Company)
The enclosed member, managing member or managing filing.	er resignation and fee(s) are submitted for
Please return all correspondence concerning this ma	tter to:
Jennifer Nieves (Contact Person)	· ·
(Firm/Company)	2012 AUG 20 SECRETARY TALLAHASSE
205 Worth Ave, Suite	20 PH STA
Palm Beach, FL 3348 (City/State and Zip Code)	CT1
For further information concerning this matter, pleas	se call:
Richard Warrer at (Are	ea Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Fl \$25 Filing Fee	lorida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle Tallahassee, 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 it appears on the records	of the Florida Department
2. This limited liabi	lity company was organi	zed under the laws of:	20 MANG 20 SECRETARY ALLAHASSEE
3. The Florida docu 46 - 0.56	ment/registration numbe	r of this limited liability com	npany is: RAA
4. I, Jennite	ame of Person Resigning)	, hereby resign as a	
resignation in wri	ing.	n the limited liability compar	y has been notified of my
Signature of Resignature	gning Member, Managin	g Member or Manager	•
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		