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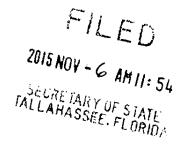
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Road Warrior Outfitters, LLC (Name of Limited Liability Company)		
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to:		
Matthew Nayre Speer (Contact Person)		
Road Warrior Outfitters, LLC (Firm/Company)		
1104 W. CORAL STREET (Address)		
TAMPH FL 33602-1015 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Matthew W. Speer at (813) 863-7951 (Name of Contact Person) (Area Code & Daytime Telephone Number		
Enclosed please find a check made payable to the Florida Department of State for: \$\sqrt{1}\$\$\\$25\$ Filing Fee & Certified Copy		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
CR2E079 (2/14)		





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department	
OF State is: ROAD WARRIOR OUTFITTERS LLC	
2. The Florida document/registration number assigned to this limited liability company is:	
L 14000098098	
3. The date this member/manager withdrew/resigned or will withdraw/resign is: $\frac{11 + 03 + 2015}{2015}$	
4. I, Deborah M. Speer, hereby withdraw/resign as a (Print Name of Person Resigning)	
Manager (Print Title)	
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.	
Debbie M. Spec Signature of Dissociating Member or Resigning Manager	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	