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COVER LETTER

TO: Registration Section Division of Corporations	**************************************
SUBJECT: DEMETER (Name of Lim	SYSTEMS LCC ited Liability Company)
The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning	this matter to:
Louis J BASE,	VESE
(Conact Person)	
· (Firm/Company)	
6061 LEXINGTON BAR	<u>'.</u> K
ORLANDO, FL (City/State and Zip Code)	32819
For further information concerning this matter	er, please call:
OUTS J BASENESE (Name of Contact Person)	at (407) 217-542 4 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable t \$25 Filing Fee	o the Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



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
of State is:	DEMETER SYSTEMS LCC
_	oility company was organized under the laws of: AWARE
	ument/registration number of this limited liability company is:
4. 1, <u>Louis</u> (Print N	TOPSENESE, hereby resign as a PRES, CEO CHATAMAN Name of Person Resigning) (Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my riting.
Signature of Res	igning Member, Managing Member or Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)