## #1109000000431

(Re	equestor's Name)	,
(Ad	Idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	- #\
	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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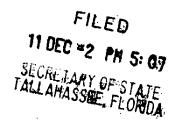
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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: ADSHIP.COM, LLC	
(Name of Limited	Liability Company)
The enclosed member, managing member or mafiling.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning this	s matter to:
WILLIAM R. TUNKEY	
(Contact Person)	<del></del> -
(Firm/Company)	
2250 SW THIRD AVE, 4 FLOOR	
(Address)	
MIAMI, FL 33129	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
WILLIAM R. TUNKEY	( 305 ) 858-9550
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the	ne Florida Department of State for:
\$25 Filing Fee	\$55 Filing Fee &
	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	

CR2E079 (5/06)





## 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 composition of State is: ADSHIP.COM, LLC	pany as it appears on the records of the Florida Department
2. This limited liability company was org	ganized under the laws of:
3. The Florida document/registration nur M09000000431	mber of this limited liability company is:
4. I, WILLIAM R. TUNKEY  (Print Name of Person Resigning)	, hereby resign as a VPS (Print Title)
/ /	firm the limited liability company has been notified of my
Signature of Resigning Member, Mana	ging Member or Manager
Filing Fee: \$25.00 (Required)	

Certified Copy: \$30.00 (Optional)