## m09000004345

(Re	(Requestor's Name)					
(Address)						
<b>(</b> .=	,					
(Address)						
(Cit	ty/State/Zip/Phon	ne #)				
•		•				
PICK-UP	☐ WAIT	MAIL				
<b></b>						
(Bu	siness Entity Na	me)				
(Do	cument Number	,				
(LX	cument number	)				
Certified Copies Certificates of Status						
	•	·····				
Special Instructions to	Filing Officer:					

Office Use Only



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05/13/10--01008--027 \*\*110.00



S. HAWKES

MAY 1 4 2010

EXAMINER

## **COVER LETTER**

	FO: Registration Section Division of Corporations				
SURIEC	T: BSE Management, LLC				
SUBJEC	(Name of Limite	ed Liability Cor	npany)		
The enclo	sed member, managing member or n	nanager resig	nation and fee(s) are submitted for		
Please ret	urn all correspondence concerning th	nis matter to:			
George	e W Koehn		_		
	(Contact Person)		_		
	(Firm/Company)		_		
1003 T	emple Grove	<del></del>	-		
Winter	(Address) Park, FL 32789				
	(City/State and Zip Code)		_		
For furthe	er information concerning this matter	, please call:			
George	e W Koehn	at ( 407	808-5265		
	(Name of Contact Person)	(Area Code	& Daytime Telephone Number)		
Enclosed	please find a check made payable to \$25 Filing Fee	the Florida I	Department of State for: \$55 Filing Fee & Certified Copy		
Registrati Division of Clifton B 2661 Exe	on Section of Corporations uilding cutive Center Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		

CR2E079 (5/06)







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

	limited liability company as	it appears on the records of	of the Florida Department
of State is: BS	E Management, LLC		
2. This limited liab	ility company was organized	under the laws of:	
3. The Florida doci	ument/registration number of	this limited liability comp	pany is:
M090000	04245		
4. I, George W	Koehn	, hereby resign as a _	manager
(Print N	ame of Person Resigning)	. •	(Print Title)
	bility company and affirm the	limited liability company	y has been notified of my
resignation in wr	iting.		
9r	#		
_ \ /=		<b>⇒</b>	
Signature of Resi	ign ng Member, Managing M	ember or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		