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Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					
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G. MCLEOD AUG 16 2011 EXAMINER



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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: BIG RED POWERS PORTS, LLC (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Susan Docton (Contact Person)
Big Red Powerson (45, LLC)
16123 W. Whomas Dr. (Address)
Winter Garden FL 34787 (City/State and Zip Code)
For further information concerning this matter, please call:
Susan Doctor at (423) 876-7541 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 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

1. The name of the of State is:	BIG REO Power	it appears on the records	of the Florida Depart	ment
	oility company was organized	d under the laws of:	,	
	ument/registration number o が Ø Ø Ø Ø Ø Ø Ø 8 7 7	f this limited liability con	npany is:	,
of this limited lia resignation in w	bility company and affirm the			
Signature of Res	igning Member, Managing N	1ember or Manager	,	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		TALUNIA SEE TO	11 AUG 12 PH 2

CR2E079 (5/06)