

105000036446

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

105-36446

(Document Number)

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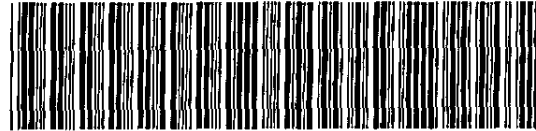
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STATE  
TALLAHASSEE - FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FOX PAINTING LLC  
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TIFFANY SIENRA  
(Name of Person)

FOX PAINTING LLC  
(Firm Company)

717 NW 70<sup>TH</sup> WAY -  
(Address)

MARGATE, FL 33063  
(City, State and Zip Code)

For further information concerning this matter, please call:

TIFFANY SIENRA at (954) 709-8430  
(Name of Person) (Area Code & Daytime Telephone Number)

**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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$55 Filing Fee &  
Certified Copy

CR2E079 (8 05)

\$55



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER**

I, MAIDA SIERRA, hereby resign as MANAGING MEMBER  
(Title)  
of FOX PAINTING LLC  
(Limited Liability Company)

a limited liability company organized under the laws of the State of FLORIDA  
and affirm that the limited liability company has been notified in writing of the resignation.

[Signature]  
(Signature of resigning manager, managing member or member)

**FILING FEE IS \$25.00**

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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TALLAHASSEE FLORIDA