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2009 AUG 24 AM 11: 15 SECRETARY OF STATE SALL AHASSEE FLORIDA

T. CLINE

AUG 25 2009

EXAMINER

COVER LETTER

Division of Corporations		
SUBJECT: At J Home Solutions of Name of Limited Liability Co	LCIENTIVE DESIGNS/IC	
The enclosed member, managing member or manager resigning.	gnation and fee(s) are submitted for	
Please return all correspondence concerning this matter to	:	
Thomas (Contact Person)		
Ats Home Solutions (Firm/Company)	_	
95-40/ Leo DR. (Address)	_	
Fernandina Beach 91, 320 (City/State and Zip Code)	2009 AUG 24 SEGRETARY	
For further information concerning this matter, please call:	: SSS 24	
Thomas Ceams at (904	2 491-080 See & Daytime Telephone Number 5	
(Name of Contact Person) (Area Code	e & Daytime Telephone Number	
Enclosed please find a check made payable to the Florida	· ·	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Registration Section

TO:

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 re Thome Sobutions & Creative D	-
2. This limited liab	ility company was organized under the laws of:	
3. The Florida docu 1050000	ment/registration number of this limited liability	y company is:
of this limited lial	ame of Person Resigning) oility company and affirm the limited liability co	(Print Title)
resignation in writer states and states are states as a second state of Resignature of Resignatu	going Member, Managing Member or Manager	ASEC PARTIES ASEC
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	AUG 24 AM II: 15 ANASSEE, FLARADI