106000055095

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certifiçates of Status
Special Instructions to Filing Officer:

Office Use Only



600087687436

02/08/07--01032--014 **55.00

SECADIARY OF STATE

ZOTFEB-8 ANTI: 0

Wealside

COVER LETTER

Division of Corporations				
SUBJECT: SPECIALIZED MARI	INE SERVICES, L.L.C.			
	imited Liability Company)			
The enclosed member, managing member filing.	or manager resignation and fee(s) are submitted for			
Please return all correspondence concerni	ng this matter to:			
James A. Dobar				
(Contact Person)				
SPECIALIZED MARINE SERV	'ICES, L.L.C.			
(Firm/Company)				
3608 Biltmore Drive	TARY SI			
(Address)				
Panama City Beach, Florida 32 (City/State and Zip Code)	2408 S			
, ,	·			
For further information concerning this m	atter, please call:			
James A. Dobar	at (850) 345 8865			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed please find a check made payab \$25 Filing Fee	le to the Florida Department of State for: \$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			

CR2E079 (5/06)

Tallahassee, Florida 32301

TO:

Registration Section



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company a			ida Departmer	ıt
2. This limited liabi Florida, U.S	lity company was organize S.A.	ed under the laws of:			
3. The Florida docu	ment/registration number	of this limited liability con	npany is:		
1060000	55095	 ·			
4. I, Rebecca J	. Dobar ame of Person Resigning)	, hereby resign as a	MGRM	LWanaging	Member
	oility company and affirm t		•	,	
* Rehees	u Dobas				
Signature of Resi	gning Member, Managing	Member or Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			SECRETARY OF S	A mary
					San J