## L04000050554

(Requestor's Name)
(Address)
(Address)
(radiossy ,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status

Special Instructions to Filing Officer:

A. LUNT

MAY 2 6 2010

**EXAMINER** 

Office Use Only



600179956186

05/24/10--01804--011 \*\*25.00

VECRETARY OF STATE

FILED

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Advanced Home Services, LLC (Name of Limited Liability Control of	ompany)
The enclosed member, managing member or manager resfiling.	signation and fee(s) are submitted for
Please return all correspondence concerning this matter to	o:
Jay Bowermeister	
(Contact Person)	<del></del>
Advanced Home Services, LLC	
(Firm/Company)	2011 TALU
1644 NE 22 Ave C	2010 MAY 24 SHORE GARY ALLAHASSE
(Address)	- SSE 24 F
Ocala, FL 34470	MAY 24 PM 2: 82 REPARY OF STATE RHASSEE, FLORIDA
(City/State and Zip Code)	- CRID
For further information concerning this matter, please cal	ll:
Jay Bowermeister at ( 352	369-4487
(Name of Contact Person) (Area Co	de & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida  \$25 Filing Fee	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 2661 Executive Center Circle	P.O. Box 6327
Tallahassee, Florida 32301	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 records of the Flovanced Home Services, LLC	orida D	epartm	ent
2. This limited liab	oility company was organized under the laws of:	ALLAHAS	2010 HAY 24	7
3. The Florida doc <u>L0400056</u>	ument/registration number of this limited liability company is:	RY OF STATE	4 PM 2: 02	
4. I, Jay E. L.	Bower meister , hereby resign as a MGRN (Property of Person Resigning)	1 rint Title,	 )	_
of this limited lia resignation in wr	bility company and affirm the limited liability company has been titing.	en notif	ied of	my
Jay E. Bowe	igning Member, Managing Member or Manager			
Signature of Res	igning Member, Managing Member or Manager			
Filing Fee:	\$25.00 (Required) \$30.00 (Ontional)			

 Jay E. Bowermeister 3650 SE 26 Court Ocala, FL 34471

State of Florida
Department of State
Division of Corporations
Bureau of Commercial Recording
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

PO Box 6327 Tallahassee, FL 32314

Attn.: Mrs. Karon Beyer

Mrs. Beyer,

Per our conversations I am submitting the attached forms with the filing fee. Please record the information as discussed.

Thank you for your time and attention in this matter.

Sincerely,

Jay & Bowermes

Jay E. Bowermeister