## L02000004626

(Re	equestor's Name)			
(Address)				
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PICK-UP	WAIT	MAIL MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

JUN - 8 2010

EXAMINER

## **COVER LETTER**

<b>ΓO:</b> Registration Section Division of Corporations	
SUBJECT: ROYAL CRANE LLC	
(Name of Limite	d Liability Company)
The enclosed member, managing member or nilling.	nanager resignation and fee(s) are submitted for
Please return all correspondence concerning th	is matter to:
MG SOLLARS	
(Contact Person)	
ROYAL CRANE LLC	
(Firm/Company)	
1360 NW 33RD STREET	
(Address)	
POMPANO BEACH FL 33064	
(City/State and Zip Code)	
For further information concerning this matter,	, please call:
M G SOLLARS	954 973-3030
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to	the Florida Department of State for:
\$25 Filing Fee	\$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
Tallahassee, Florida 32301	

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	mited liability company a	as it appears on the records	s of the Florida Department
2. This limited liabil FLORIDA	ity company was organize	ed under the laws of:	
3. The Florida docur		of this limited liability con	npany is:
(ゴヘ) 4. I, JAMES A R (Print Na)	ROBERTSON ne of Person Resigning)	, hereby resign as a	MANAGING MEMBER (Print Title)
	lity company and affirm t	the limited liability compar	ny has been notified of my
Signature of Resig	ning Member, Managing	Member or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		SECRETARY OF COR

CR2E079 (5/06)