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FILED 1004 AUG -2 P 1: 28 SECRETARY OF STATE

COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: HI-TECH COVERINGS 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: |
| WINIFRED (HAMBERS (Name of Person) |
| HI-TECH COVERINACLIC SES T |
| 131 WORTH CT. S. (Address) |
| W.P.B. F2 33405 PA 28 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| PAUL E. HAHX at (954) 429 3931 (Name of Person) (Area Code & Daytime Telephone Number) |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations |

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (8/05)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301



FILED

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

| I, WINIFRED HAMBERS hereby resign as MANAGER (Title) |
|--|
| (Title) |
| of HI-TECH COVERING 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 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