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(Re	questor's Name)	
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section

CR2E079 (5/06)

Division of Corporations	
SUBJECT: PETT, FURMAN & JACOBSON, I	
(Name of Limited Liability	Company)
The enclosed member, managing member or manager refiling.	esignation and fee(s) are submitted for
Please return all correspondence concerning this matter	to:
Wendy L. Furman, Esq. (Contact Person)	
Pett, Furman & Jacobson, PL (Firm/Company)	
Suite 316, 2101 N.W. Corporate Blvd. (Address)	Z001
Boca Raton, FL 33431	AS P
(City/State and Zip Code)	— SER €
For further information concerning this matter, please concerning the please concerning	4: 18
Wendy L. Furman, Esq. at (563) (Name of Contact Person) (Area C	Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Floric XX \$25 Filing Fee	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the lin	nited liability company as it ap	opears on the records of	the Florida Dep	partment
of State is:	ETT, FURMAN & JACOBSON,	P.L.		
2. This limited liabilit	ry company was organized und	ler the laws of:		
Florida			FAL SE	
		-	2001 SEP SECRETA	N
				9
3. The Florida docum	ent/registration number of this	limited liability compa	in Kasa 👇 💮	(22) (3)
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			15. 15. 14.	
4. I, JEANNINE J.	ACOBSON	_, hereby resign as a	Manager-	
(Print Nam	e of Person Resigning)		P(Print Title)	
of this limited liabil:	ity company and affirm the lin	nited liability company	has been notifie	d of my
resignation in writir	ıg.			
	/ effective	e 9/1/07		
Signature of Resign	ing Member, Managing Memb	ber or Manager		
		_		
	-			
Filing Fee:	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			