

LOB0000019257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

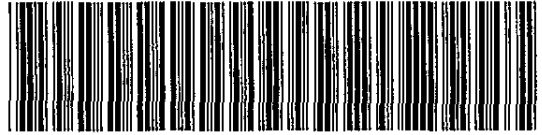
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Handwritten signature and date 3/14

Office Use Only



800065821778

03/06/06--01041--004 **100.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 MAR 14 PM 3:14

APPROVED
AND
FILED



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Marcia Cortada, hereby resign as Member/Manager
(Title)

of Skylight Solutions & More, 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)

Marcia Cortada

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

CR2E079 (8/05)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 MAR 14 PM 3:14

APPROVED
AND
FILED