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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: CUSTOM NATURAL STONE, (Name of Limited L	
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matt	ter to the following:
RISHI KAWALL (Name of Person)	SOEC 30 PM 12: 09
CUSTOM NATURAL STONE, LLC (Firm/Company)	D9
10862 SW 188TH STREET	
(Address)	
MIAMI, FL 33157	
(Cîty/State and Zip Code)	• • • • • • • • • • • • • • • • • • •
For further information concerning this matter, please	e call:
RISHI KAWALL at (30	5 234-9464
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amoun	nt:
\$25 Filing Fee	355 Filing Fee & Certified Copy

INHS18 (8/05)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, MILTON WILLIAMS	, hereby resign as MANAGING MEMBE	<u>:</u> R
	(Title)	
of CUSTOM NATURAL STONE, LLC		_ ,
(Limited Liz	ability Company)	,
a limited liability company organized under the	laws of the State of FLORIDA	
and affirm that the limited liability company has	s been notified in writing of the resignation.	
(Signature of resigning manage	er, managing member or member) A ST DEC	
	30 ASSI	-
	PM 12: 09 STATE E, FLORID	
	TATE 09	

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tailahassee, FL 32314