

L03000041654

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

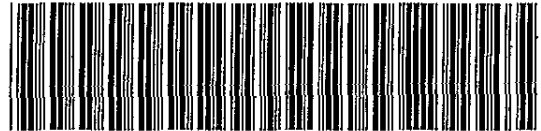
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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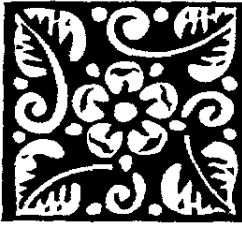
09/10/04--01042--002 **25.00

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

W

J. BRYAN SEP 13 2004

J. BRYAN SEP 24 2004



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TALLAHASSEE, FLORIDA

Elizabeth Anne Turner

address, phone & name

(PILLAR)

3380 Roslyn Road
Venice, Florida 34293
941-497-7310 - home
941-915-4781 - cell

elizabeth.turner22@verizon.net email

MAILED TO : DIVISION OF CORPORATIONS
ATTN: Registration Section
PO BOX 6327
Tallahassee, FL 32314

9-8-04

Per your attached e-mail dated 8-31-04, I
am respectfully requesting that my name (former)
Elizabeth Pillar be removed from:

American Maids, LLC
Doc. # L03000041654

My ex-husband Scott Pillar is the registered agent who
added my name on the LLC without my permission.

PLEASE REMOVE my name. \$25.00 is less than
paying for a civil suit, however I should not have
something I have not been involved with.



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

September 13, 2004

ELIZABETH ANNE TURNER
3380 ROSLYN ROAD
VENICE, FL 34293

SUBJECT: AMERICAN MAIDS, LLC
Ref. Number: L03000041654

Upon receipt of your letter and/or check(s) totaling \$25.00, no document was found. Please send your document with any fees due to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 204A00054495

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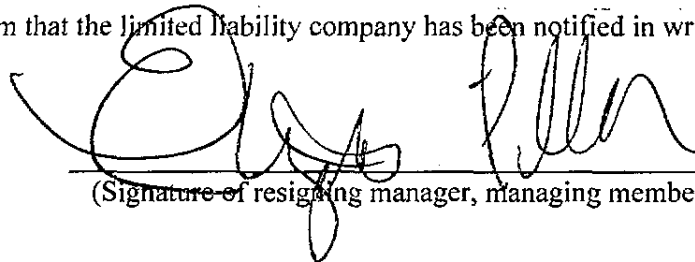
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TALLAHASSEE, FLORIDA

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, ELIZABETH ANNE PILLAR, hereby resign as manager or any connection
(Title)
of AMERICAN MAIDS, 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

- already PAID

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