## W300005150H

(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:	
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Requestor's Name)
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Address)
PICK-UP   WAIT   MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Äddress)
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(City/State/Zip/Phone #)
(Document Number)  Certified Copies Certificates of Status	PICK-UP WAIT MAIL
Certified Copies Certificates of Status	(Business Entity Name)
	(Document Number)
Special Instructions to Filing Officer:	Certified Copies Certificates of Status
	Special Instructions to Filing Officer:

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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: ROBERT SANDERS CONSTRUCTION, LLC (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
JULIANA DORSEY (Contact Person)
KOBERT SANDERS CONSTRUCTION, LLC (Firm/Company)
(005 N Co Hwy 393 Ste 9D) (Address)
SANTA ROSA BENTH FL 32459  (City/State and Zip Code)  For further information concerning this matter, please call:  JULIANA DORSEY  (Name of Contact Person)  (Area Code & Daytime Telephone Number)
(City/State and Zip Code)  For further information concerning this matter, please call:  For further information concerning this matter, please call:
JULIANA DORSEY   at (850) 267 0034   ST   ST   ST   ST   ST   ST   ST   S
Enclosed please find a check made payable to the Florida Department of State for:  \$25 Filing Fee \$ Certified Copy
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 32314

CR2E079 (5/06)

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 limited liability company as it appears on the records of the Florida Department	ent
of State is: ROBERT SANDERS CONSTRUCTION, LLC	
of State is.	' <u>:</u>
2. This limited liability company was organized under the laws of:	
FLORIDA .	
7. 2	
	energe.
3. The Florida document/registration number of this limited liability company is: 全常 号	1
3. The Florida document/registration number of this limited liability company is: ARR COMPANY	<u></u>
	m
4. I, EDWARD SCRUGGS hereby resign as a MATTER 3	
(Print Name of Person Resigning) (Print Tyle)	All Parties
of this limited liability company and affirm the limited liability company has been totified of r	ny
resignation in writing.	
Signature of Resigning Member, Managing Member or Manager	•

Filing Fee: Certified Copy: \$25.00 (Required)

\$30.00 (Optional)