

LO3000055689

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

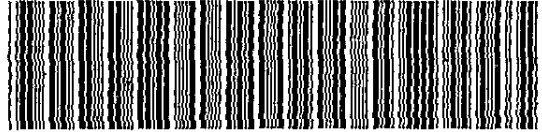
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TALLAHASSEE, FLORIDA

LO3-55689
OK

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: THOMAS S. LARDIERE TILE & MARBLE, LLC
(Name of Limited Liability Company)

DOCUMENT NUMBER: L03000055689

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

THOMAS S. LARDIERE
(Name of Person)

Thomas S. Lardiere Tile & Marble, LLC
(Name of Firm/Company)

450 NW 46 Street
(Address)

Pompano Beach, FL 33064
(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas S. Lardiere at (954) 946-8242
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for ~~\$85.00 for an active limited liability company~~ or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited member ~~liability company~~. +25⁰⁰ to amendment to add new member

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, WILLIAM CASSESE, hereby resign as MEMBER/MANAGER
(Title)

of THOMAS S. LARDIERE TILE & MARBLE, 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.

William P. Casse
(Signature of resigning manager, managing member or member)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

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