L0400000 4221

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



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J. BRYAN

AUG 1 1 2008

EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|--|
| SUBJECT: White Masonry LLC (Name of Limited Liability Company) | |
| The enclosed member, managing member or manager resignation at filing. | nd fee(s) are submitted for |
| Please return all correspondence concerning this matter to: | m2 |
| Mary Pearce (Contact Person) | 08 AUG -8 PH |
| Panhandle Business Services (Firm/Company) | PH 1: 25 |
| 1265 Hwy, 331 S. (Address) | 'ණ |
| Defuniak Springs, FL. 32435 (City/State and Zip Golie) | |
| For further information concerning this matter, please call: | |
| (Name of Contact Person) at (\$\frac{850}{\text{Area Code & Dayting}}\$ | 12-2752 ne Telephone Number) |
| Enclosed please find a check made payable to the Florida Departme \$25 Filing Fee \$55 Filing Certification \$55 Filing Certification \$25 Filing Fee \$10 Per \$25 Pe | |
| Registration SectionRegistrationDivision of CorporationsDivisionClifton BuildingP.O. Box | ation Section n of Corporations ox 6327 ssee, 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

| | nited liability company as it nite Masonry | | of the Florida Depa | artment |
|---|---|---------------------------|-----------------------|-------------|
| 2. This limited liabilit | y company was organized u | nder the laws of: | | OB AUG -8 |
| 3. The Florida docum | ent/registration number of th | is limited liability comp | pany is: | Hq 8 |
| 4.1, Michae (Print Nam | W. Ayers e of Person Resigning) | , hereby resign as a _ | MGRM (Print Title) | 1:25 |
| of this limited liabil resignation in writing | ity company and affirm the l | imited liability company | y has been notified | of my |
| Muhul. | lyn | | | |
| Signature of Resign | ing Member, Managing Mer | mber or Manager | | |
| Filing Fee: Certified Copy: | \$25.00 (Required) \$30.00 (Optional) | : | | |