## 10770000001701

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(Address)			
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PICK-UP WAIT MAIL			
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## **COVER LETTER**

TO: Registration Section Division of Corporations	
2b.e e. ee.pe.anee	•
SUBJECT: Southern Superform Pr	roducts LLC
(Name of Limi	ited Liability Company)
The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning	this matter to:
Roan Koehn	
(Contact Person)	
(Firm/Company)	<u> </u>
7341 Pine Forest Road	
(Address)	
Walnut Hill, FL 32568	
(City/State and Zip Code)	
For further information concerning this matter	er, please call:
Ann C. Brooks	at ( 850 ) 256-2999
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to	
\$25 Filing Fee	\$55 Filing Fee &
	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	

CR2E079 (5/06)





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## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	e limited liability company as it outhern Superform Prod	appears on the records of the Florida Department ducts LLC
2. This limited liab	pility company was organized u	inder the laws of:
3. The Florida doc L040000	7701	his limited liability company is:
4. l, Roan Koe	ehn Name of Person Resigning)	, hereby resign as a Manager / Momber (Print Title)
	bility company and affirm the	limited liability company has been notified of my
Signature of Res	igning Member, Managing Me	mber or Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	