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2000 FEB 25 AM II: 27 SECRETARY OF STATE TAIL AHASSEE, FLORIDA

T. CLINE
FEB 2 6 2008
EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: MAVICKAS CON	ntracting, LLC ited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
AL Navickas (Name of Person)	
Navichas Contraction (Firm/Company)	SECO TALL
1512 Florida Are.	2008 FEB 25 I
(Address) PAlm Harbor, F1 346 (City/State and Zip Code)	The state of the s
For further information concerning this matter, p	please call:
AL Navicko: at (Name of Person)	(727) 284-586 '7 (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following an	mount:
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy



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 of State is:	limited liability company as it ap	opears on the records of	of the Flori	da Department	t
	ility company was organized und	ier the laws of:			
3. The Florida docu	ument/registration number of this	- ilimited liability comp	oany is:	2008 FEB 25 SECRETARY TALLAHASS	Section 1
4. I, Toby	A. NAVICKAS ame of Person Resigning)	_, hereby resign as a _		YOUR :2	1
of this limited lial resignation in wri	oility company and affirm the lin	nited liability company	/ has been	notified of my	
Signature of Resi	gning Member, Managing Meml	per or Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				