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(Requestor's N	ame)	
(Address)		
(Address)		
(City/State/Zip/Phone #)		
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Quality Constitute Name of Limited Liability Constitute C	tion and Concrete, 11
Dear Sir or Madam:	
The enclosed Resignation of Member, Managing Member or	Manager and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the	following:
Jason Hobbs (Name of Person)	
(Firm/Company)	<u> </u>
199 Dayou Landing Rd	
Surta Rosa Booch FL 36 (City/State and Zip Code)	1459
For further information concerning this matter, please call:	T
(Name of Person) at (85)	ode & 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 amount:	
\$25 Filing Fee CR2E079 (8/05)	\$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Jason Hobbs , hereby resign as Manager (Title)
of Quality Construction and Concrete, UC (Limited Liability Company)
a limited liability company organized under the laws of the State of FLocidos.
and affirm that the limited liability company has been notified in writing of the resignation.

(Signature of resigning manager, managing member or member)

1005 NOV -9 P 2: 42 SECRETARY SEE FLORIES

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