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| Special Instructions to | Filing Officer: | |
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Office Use Only



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SECRETARY OF STATE
JALLAHASSEE, FLORIO,



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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 20, 2009

MACIEJ WLOSINSKI HRI MARBLE & GRANITE LLC 350 TALL PINES ROAD UNIT K WEST PALM BEACH, FL 33413

SUBJECT: HRI MARBLE GRANITE LLC

Ref. Number: L04000051630



We have received your document for HRI MARBLE GRANITE LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 609A00013147

COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|--|
| SUBJECT: HRI MARBLE GRA (Name of Limited Lin | ANITE ELC ability Company) |
| The enclosed member, managing member or mana filing. | |
| Please return all correspondence concerning this n | natter to: |
| TOMASZ BUTNAPOWSIC/ | 99 APR 2 SECRETA TALLAHA |
| (Firm/Company) | |
| 350 TALL PINES RD # 9 | FILED 09 APR 28 AM IO: 26 SECRETARY OF STATE FLORIDA TALLAHASSEE. FLORIDA |
| D. P. B. FC 33413 (City/State and Zip Code) | |
| For further information concerning this matter, ple | ase call: |
| TOM BUJNAROUSE at ((Name of Contact Person) (A | rea Code & Daytime Telephone Number) |
| Enclosed please find a check made payable to the \$25 Filing Fee | Florida Department of State for: \$55 Filing Fee & Certified Copy |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 |

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

| _ | limited liability company as | it appears on the records of the F | lorida Department |
|--------------------------------|--|--|--------------------|
| | ility company was organized | | · |
| 4 | ument/registration number of | f this limited liability company is: | |
| | | , hereby resign as a V/CE (left) e limited liability company has be | |
| resignation in wr | iting. | | · |
| Signature of Res | igning Member, Managing N | 1ember or Manager | |
| Filing Fee: Certified Copy: | \$25.00 (Required) \$30.00 (Optional) | | 9 APR 28 SECRETARY |