## L04000092924

| (Red                                    | questor's Name)                       |             |  |  |
|---|---------------------------------------|-------------|--|--|
| (Address)                               |                                       |             |  |  |
| (Address)                               |                                       |             |  |  |
| (City                                   | y/State/Zip/Phone                     | e #)        |  |  |
| PICK-UP                                 | MAIT WAIT                             | MAIL        |  |  |
| (Bu                                     | siness Entity Nar                     | me)         |  |  |
| (Day                                    | cument Number)                        | <u>,</u>    |  |  |
| (00)                                    | cament Namber)                        |             |  |  |
| Certified Copies                        | _ Certificates                        | s of Status |  |  |
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SECRETARY OF STATE
SALLAHASSEE, FLORIDA

J. BRYAN

SEP 1 3 2010

**EXAMINER** 

## **COVER LETTER**

| TO: Registration Section Division of Corporations  |  |
|--|--|
| SUBJECT: Automatic Boat Detail, LLC (Name of Limited Liabil)   | ity Company)   |
| (Name of Limited Liabit  | ry Company)  |
| The enclosed member, managing member or manage filing.   | r resignation and fee(s) are submitted for   |
| Please return all correspondence concerning this matt  | er to:   |
| Lance C. Fuchs, Esq.   |  |
| (Contact Person)   | —— <del>I</del> SE <b>5</b>  |
| Foster & Fuchs, PA   | SEP  |
| (Firm/Company)   | SEP 10 PI<br>LAHASSEE.   |
| 4425 Military Trail Suite 109  | SECRETATE STATE SECREDANASSEE, FLORIDA   |
| (Address)  | ORNE   |
| Jupiter, FL 33458  | Direction of the control of the cont |
| (City/State and Zip Code)  | ·  |
| For further information concerning this matter, please   | e call:  |
| Lance C. Fuchs at ( 5  | 61 <sub>1</sub> 799-6797   |
|  | Code & Daytime Telephone Number)   |
| Enclosed please find a check made payable to the Flo \$25 Filing Fee   | srida Department of State for: \$55 Filing Fee & Certified Copy  |
| 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  |

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

|   | mited liability company as it<br>matic Boat Detail, LL |                           | of the Flor    | ida Department          |
|---|--|---------------------------|----------------|-------------------------|
| 2. This limited liabiling Florida             | ity company was organized u                            | nder the laws of:         |                | SEP 10 PM               |
| 3. The Florida docum                          | nent/registration number of th                         | nis limited liability com | ipany is:      | PH 12: 42  SEE, FLORIDA |
| 4. I, Steven B. C                             | Clark<br>ne of Person Resigning)                       | , hereby resign as a      | Managing (Prin | Member and Member       |
| of this limited liabi<br>resignation in writi | lity company and affirm the l                          | imited liability compar   | ıy has been    | notified of my          |
| Signature of Resign                           | ning Member, Managing Men                              | mber or Manager           |                |                         |
| Filing Fee:<br>Certified Copy:                | \$25.00 (Required)<br>\$30.00 (Optional)               |                           |                |                         |
|   |  |                           |                | - :                     |