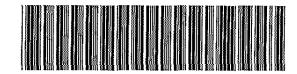
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SUCRETARY OF STATE OF CORPORATIONS

OF CUT _6 PM 2: 06

J. BRYAN SEP - 7, 2006:

COVER LETTER

	tion Section a of Corporations	•	
SUBJECT:	M & M SERVICES OF LEH		
	(Name of L	imited Liability Company)	\$
		,	
The enclosed Art	icles of Amendment and fee(s) are su	bmitted for filing.	
Please return all	correspondence concerning this matte	er to the following:	
•	GREGORY F.	PILLON	0 E
	•	(Name of Person)	6 St
	GPLAW- LAW OFFICE:	S OF GREGORY PILLON, P.I	
		(Firm/Company)	6 P
	730 NW 40tl	h AVENIIE	0FC0RPORM 2: (
•		(Address)	DIVISION OF CORPORALIST OF SEP -6 PM 2: 06
	MT 4347 - 77 (A)	DTD4 22126	,
		RIDA 33126 /State and Zip Code)	
For further inform	nation concerning this matter, please	call:	
	GREGORY F. PILLON	at (305) 642-	1440
	(Name of Person)	(Area Code & Daytim	e Telephone Number)
Enclosed is a check	for the following amount:	ŧ	•
\$25.00 Filing Fe	e \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
]	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET/COURI Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	n ations nter Circle



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Maribel Rivero, hereby res	sign as Member Managing Member
of M&M Scrucer of Lehigh L. L. C. (Limited Liability Company)	·
a limited liability company organized under the laws of the State	e of Florida
and affirm that the limited liability company has been notified in	n writing of the resignation.
(Signature of exploring manager, managing ma	umbor or mambor)
(Signature of resigning manager, managing me	SECRETARY OF STUDENT OF SEP -6 PM 2

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