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(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Statu	us
Special Instructions to Filing Officer:	

Office Use Only



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SECRETARY OF STATE



## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Oliver Edwards Maintenance LLC (Name of Limited Liability Company)	
Dear Sir or Madam:	
The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filin	
Please return all correspondence concerning this matter to the following:	
Oliver Educates III (Name of Person)  (Firm/Company)	
• • •	
2757 Thompson Valley Rd	
Montroclo, Fl 32344 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Oliver Edwards TIT at (850) 997-6154  (Name of Person) (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 amount:	
\$25 Filing Fee \$\times \text{CR2E079 (8/05)}\$	



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Oliver Edwards III , hereby resign as Managing Member (Title)
of Oliver Edwards Maintenance LLC. (Limited Liability Company)
a limited liability company organized under the laws of the State of Florida,
and affirm that the limited liability company has been notified in writing of the resignation.
Oliver Externals III
(Signature of resigning manager, managing member or member)

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

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