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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne) '
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATE
SECRETARY OF STATE

#### **COVER LETTER**

Division of Corporations		
SUBJECT: 5VBSURFACE - (Name of Limited L	DURFACE INTEGRATED SOLUTION LIABILITY COMPANY)	
The enclosed member, managing member or mar filing.	nager resignation and fee(s) are submitted for	
Please return all correspondence concerning this	matter to:	
ALEJA SIVAVA C	JSATI Lace - Suface Integrated Solutions LLC	
(Fiend ampany)	ace - Surface of 1100	
8179-MARTIMETIASS	<u>5. Unit</u> 214	
WINDERTERE F) 347	786_	
For further information concerning this matter, pl	lease call:	
Name of Contact Person) at (	407 656 - 6356  Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the \$25 Filing Fee	e Florida Department of State for:  \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314	
2001 Executive Center Circle	Talianassee, Fiorida 32314	

CR2E079 (5/06)

Tallahassee, Florida 32301



# 08 APR 28 PH 12: 17 SECRETARY OF STATE TALLAHASSEE FLORIDA

### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it appears on the records of the Florida Department
of State is: SUBSURFACE SURFACE LNTEGRATED SOLU.
2. This limited liability company was organized under the laws of:  500 F FORDA.
3. The Florida document/registration number of this limited liability company is:
L OS DOS PIOSO
4. I, VAHORE TO DELEVEZ, hereby resign as a PER (Print Name of Person Resigning) (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my
resignation in writing.
X Hold Lell Signature of Resigning Member, Managing Member or Manager
Filing Fee: \$25.00 (Required)

Certified Copy:

\$30.00 (Optional)