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(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
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T. CLINE
JUN 1 8 2008
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: DURABLE ROOFING ULC (Name of Limited Liability Company)		
The enclosed member, managing member or manager resignation and fee(s) are submitted filing.	ed for	
Please return all correspondence concerning this matter to:		
MICHAEL MORRES (Contact Person)		
(Connect Cracin)		
(Firm/Company)		
34 HEARTHSTONE DRAWE (Address)	200 J	
(7000000)	UN 17	Parameter .
(City/State and Zip Code)	2008 JUN 17 AM 10: 10 SECRETARY OF STATE SECRETARY OF STATE	
For further information concerning this matter, please call:	ORIE ORIEN	
MTeHAL MOMBS at (860) 228-1346 (Name of Contact Person) (Area Code & Daytime Telephone Number		
(Name of Contact Person) (Area Code & Daytime Telephone Number))	
Enclosed please find a check made payable to the Florida Department of State for:		
\$25 Filing Fee \$\sqrt{\sq}}\sqrt{\sq}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}		
STREET/COURIER ADDRESS: MAILING ADDRESS:		
Registration Section Registration Section		
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32314		

CR2E079 (5/06)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

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

	imited liability company a	as it appears on the records o	of the Florida I	Department	
2. This limited liabi	lity company was organize	ed under the laws of:			
	ment/registration number	of this limited liability comp	oany is: TALLAHA	2008 JUN 17	and Company
of this limited liab resignation in write	ility company and affirm	, hereby resign as a the limited liability company Member or Manager	וויי (בייות)	究 异	agentine (
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				