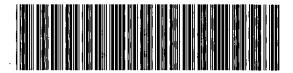
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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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FILED SECHETARY OF STATE OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SPECIALTY GRANIT (Name of Limited)	E & MARBLE LLC Liability Company)
The enclosed member, managing member or mafiling.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning this	s matter to:
IRVING BETROCK	
(Contact Person)	
	07 AUG -9
(Firm/Company)	AUG OF
7770 DAVIE ROAD EXT.	07 AUG -9 PH 4: 12
(Address)	
HOLLYWOOD, FL 33024 (City/State and Zip Code)	
For further information concerning this matter,	please call:
IRVING BETROCK (Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	he Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314

Tallahassee, Florida 32301

CR2E079 (5/06)



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 lin of State is: SPE	nited liability company as i	it appears on the records	of the Florida Dep LC	partment
2. This limited liabilit FLORIDA	y company was organized	under the laws of:		OT AUG -9
3. The Florida documents L0600008	ent/registration number of 3404	this limited liability con	npany is:	PH 4: 13
	e of Person Resigning) ity company and affirm the	hereby resign as a limited liability compa	(Print Title)	
Toletan	_	ember or Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			

CR2E079 (5/06)