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(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	e)
(Do	ocument Number)	
•		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:]
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	Office Use Only	1, 1



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DE JUN 19 PM 2: 20 SECHETARY OF STATE SECHETARSSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Benjamin Paul King's Maintenance Service (Name of Limited Liability Company)		
Dear Sir or Madam:		
The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Christian King (Name of Person) Benjamin Paul King's Mantenance Service (Firm/Company)		
U309 154h St-W (Address)		
Lehigh Acres, FL 33971 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Benjamin King at (239) 989-2166 (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)} \text{\$55 Filing Fee & Certified Copy}		



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

6 ·			
I. Christian S. King hereby resign as Manager ?			
or Benjamin Paul King's Maintenance Service Lice			
(Limited Lability Company)			
a limited liability company organized under the laws of the State of Hovida,			
and affirm that the limited liability company has been notified in writing of the resignation.			
Phtush Ste			

FILING FEE IS \$25.00

(Signature of resigning manager, managing member or member)

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314