302188

, (Re	(Requestor's Name)				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
(DC	ocament (vamber)				
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					

Office Gan MCLEOD

MAY 1 2 2008 EXAMINER



000118895080

05/08/08--01010--008 **25.00

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: RG Construction LLC (Name of Limited Liability Company)				
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to:				
FRANKLIN. [ARKINSON.				
RG Construction LCC				
3938 75 St West # 1414 (Address)				
Brodutth FC. 34209 (City/State and Zip Code)				
For further information concerning this matter, please call:				
FRANKLIN, TARKINSON # (941) 5923832				
(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 Certified Copy				
STREET/COURIER ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations				

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301



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 of State is:	limited liability company as	s it appears on the record	s of the Florida Department
2. This limited liab	oility company was organized	d under the laws of:	
3. The Florida doc	ument/registration number of	f this limited liability cor	npany is:
4. I, <u>JAM</u> C. (Print N	ame of Person Resigning)	, hereby resign as a	MGRM (Print Title)
of this limited lial resignation in wr	bility company and affirm thiting.	e limited liability compa	ny has been notified of my
Signatura of Rasi	o Ca	fombon on Monagon	
Signature of Resi	gning Member, Managing M	demoer or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		ä

)8 MAY -9 PM 1: 2

CR2E079 (5/06)