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D. BRUCE

APR 08 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: OC Painting LLC (Name of Limited Liability Company)				
The enclosed member, managing member or manager resignation and fee(s) filing.	are submitted for			
Please return all correspondence concerning this matter to:				
Gladys Wel Valle (Contact Person)				
MBA GRUP Professimal Corp. (Firm/Company)	08 A Segh Talla			
995, Atlanta Blu ste 314	8 APR -8 PH 12: 54 EGRETARY OF STATE -LAHASSEE, FLORID,			
Jacksonville fl 32225 (City/State and Zip Code)	112: 54 STATE FLORIDA			
For further information concerning this matter, please call:				
(Name of Contact Person) at (904) 805-9790 (Area Code & Daytime Telephone Number)				
Enclosed please find a check made payable to the Florida Department of Sta \$25 Filing Fee \$ Certified Copy				
STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Clifton Building Registration Sec Division of Corporations P.O. Box 6327	tion			

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle Tallahassee, Florida 32301

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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 lim	nited liability company as it a	appears on the records of	f the Florida Department
of State is:	Painting LLC	•	•
	J		
2. This limited liability	y company was organized un	der the laws of:	
Florida	•		
0.00 81 11 1			•
	ent/registration number of the	is limited liability comp	any is:
106000	<u>027537</u>		
,	,		
4. I, tawin u	ega Llava mo	_, hereby resign as a _	ngem
(Print Name	of Person Resigning)		(Print Title)
of this limited liabilit	ty company and affirm the li		
resignation in writing	g.		
$m \cap 0$			
Vallen 8	26 Carrages		77.
Signature of Resigni	ng Member, Managing Men	nber or Manager	08 APR - SEGRETAN
	•	_	
			ASS
Filing Fee:	\$25.00 (Required)		m. co
Certified Copy:	\$30.00 (Optional)		
			PH 12: FLOR
			BY T