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EXAMINER



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SECRETARY OF STORE

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Crawn Plumbing (Conne of Limited Liability Conne	mpany)
The enclosed member, managing member or manager resigniling.	gnation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
Marcie Erbas (Contact Person)	<del>-</del> -
: (Firm/Company)	_
David Control of the	
Port Charlotte, FZ 3395 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Marcia Erbos at (941 (Name of Contact Person) (Area Code	268 -2692 & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida I \$25 Filing Fee	Department of State for: \$55 Filing Fee & Certified Copy
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

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as	it appears on the records of the	he Florida Department
2. This limited liab	ility company was organized	l under the laws of:	
	ment/registration number of	this limited liability compan	y is:
	oility company and affirm the	hereby resign as a	
Manager Signature of Resi	gning Member, Managing M	lember or Manager	- •
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		10 JUL 16 AM II: II: SECRETARY OF STATEMENT

CR2E079 (5/06)