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SECRETARY OF STATE

.

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: PAZ HUNTI CO	ane Protection LU Liability Company)
The enclosed member, managing member or ma filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
Onen (Contact Person)	
ACCUTAX + ACCTO (Firm/Company)	ais
130 ne 4th Ave	SECRE.
Decheld Bear (City/State and Zip Code)	olease call:
For further information concerning this matter, p	olease call:
AST MONIS GIVNUI at	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	e Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations
2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
THE TELL PROPERTY	Lananassee, Livina 32317

CR2E079 (5/06)

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 li	mited liability company as it app		ia Department
2. This limited liabil	ity company was organized under	r the laws of:	07 FEB 27 SECRETARY TALLAHASSE
3. The Florida docum	nent/registration number of this li	imited liability company is:	PM 1: 4.1
4. I, Patrici	me of Person Resigning)	hereby resign as a MEMBE (Print	Title)
of this limited liabi resignation in writi	lity company and affirm the limiting.	ed liability company has been r	notified of my
Signature of Resignature	ning Member, Managing Member	2 r or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		