# LD6000043719

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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
LD6-43719 (Document Number)
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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT:	C N H CONSTRUCTION & REMODELING, LLC			
(Name of Corporation)				
DOCUMENT NUMBER:_	NUMBER:			
The enclosed Officer/Director	or Resignation for a Corporation and fee are submitted for filing			
Please return all corresponde	ence concerning this matter to the following:			
WOODAF	RD WARREN			
(Name	of Person)			
WARREN DEV	ELOPMENT, INC.			
(Name of I	Firm/Company)			
P.O. BO	X 450178			
(A-	ddress)			
SUNRISE, I	FL 33345-0178			
(City/State	and Zip Code)			
For further information conc	erning this matter, please call:			
WOODARD WA	ARREN at ( 954 ) 325 - 8121 (Area Code & Daytime Telephone Number)			
(Name of Pers	**			

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314



August 23, 2006

WOODWARD WARREN WARREN DEVELOPMENT, INC. PO BOX 450178 SUNRISE, FL 33345-0178

SUBJECT: CNH CONSTRUCTION & REMODELING, LLC

Ref. Number: L06000043719

We have received your document for CNH CONSTRUCTION & REMODELING, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The wrong form was completed.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Letter Number: 006A00051860

Neysa Culligan Document Specialist

### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: CNH Con (Name of	STRUCTURE & REMODELING, LECT
Dear Sir or Madam:	
The enclosed Resignation of Member, Manag	ing Member or Manager and fee(s) are submitted for filing
Please return all correspondence concerning the	his matter to the following:
WOODARD WARREN	<u></u>
WARREN DEVELOPME (Firm/Company)	int, Inc.
P.O. Box 450178	<u>P</u>
SUNPISE FC 333 (City/State and Zip Code)	845-0178
For further information concerning this matter	r, please call:
(Name of Person)	at (957) 335 - 8/3/ (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 amoun	nt:
\$25 Filing Fee CR2E079 (8/05)	\$55 Filing Fee & Certified Copy



# FILED 06 SEP 19 AM 10: 41 SECRETARY OF STATE TALLAHASSEE, FLORIDA

# FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I,	WOODARD	WARREN	, hereby resign as	
of	CNH	CONSTRUCTION (Limited I	3 RemodeLIN Lability Company)	(Title)
a limi	ted liability com	pany organized under th	ne laws of the State of	FLORIDA
and a	ffirm that the lin	nited liability company l	nas been notified in writin	ng of the resignation.
	(6:	Manles	Municipal member of	

### FILING FEE IS \$25.00

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