## 060000844/

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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T. HAMPTON

MAY 3 1 2011

EXAMINER

## **COVER LETTER**

**TO:** Registration Section

CR2E079 (5/06)

Division of Corporations	
SUBJECT: Steven Solomon LLC	
	d Liability Company)
The enclosed member, managing member or mfiling.	nanager resignation and fee(s) are submitted for
Please return all correspondence concerning th	is matter to:
Steven Solomon	
(Contact Person)	
Steven Solomon, LLC	
(Firm/Company)	
11566 Privado Way	
(Address)	
Boynton Beach, FL 334374	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
Jason Marc Altman CPA	,t <u>561</u> 733-5300
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to	
\$25 Filing Fee	\$55 Filing Fee &
	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	



## FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

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

	the limited liability company as Steven Solomon LLC	t appears on the records of the Florida Departme	ent -
2. This limited I Florida	iability company was organized	under the laws of:	
3. The Florida d	<del>-</del>	this limited liability company is:	
4. I, Jane K I	EVE VS  Weeks  Name of Person Resigning)	, hereby resign as a Managing Member (Print Title)	er -
of this limited resignation in	• •	limited liability company has been notified of n	ny
Signatura of P	Vely Managing Managing M	nanhar an Mana an	
Filling Fee:	Resigning Member, Managing M	ander or Manager	SIVIE
ring rec.	\$25.00 (Required)		<b>T</b> :

Certified Copy:

\$30.00 (Optional)