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SECRETARY OF STATE
AND AMASSEE FI ORIO A

C. LEWIS

NOV 1 8 2011

EXAMINER

COVER LETTER

CR2E079 (5/06)

TO: Registration Section Division of Corporations	
SUBJECT: MGM SERVICES OF NW	F L.L.C.
(Name of Limited 1	ciability Company)
The enclosed member, managing member or mar filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
MATTHEW M. SCHNOOR	
(Contact Person)	**************************************
MGM SERVICES OF NWF L.L.C.	
(Firm/Company)	
5962 COMMERCE RD.	
(Address)	
MILTON FL 32583	
(City/State and Zip Code)	
For further information concerning this matter, pl	ease call:
MATTHEW SCHNOOR at (850 , 6198390
	Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the	
\$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	



FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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 M SERVICES OF N	it appears on the records of the WF L.L.C.	he Florida Department
2. This limited liab	ility company was organized FLORIDA	l under the laws of:	
	nment/registration number of L0608008	f this limited liability company	y is:
of this limited lial resignation in wri	ame of Person Resigning) oility company and affirm th	hereby resign as a MC e limited liability company has been been or Manager	(Print Title)
	\$25.00 (Required) \$30.00 (Optional)		