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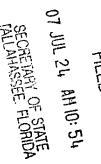
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

Division of Corporations	•
SUBJECT: KITCHEN CABINE (Name of Limited L	inbility Company)
The enclosed member, managing member or man filing.	ager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
SUSANUE HILL (Contact Person)	01
(Contact Person)	ECAE CALL OF THE C
	TANK TANK
(Firm/Company)	JUL 24 AND OF STATE PLONE OF STATE OF S
3405 E. STAGECORC	4 TRALL SEE
(Address)	<b>ን</b>
IN VERNESS A 340 (City/Steer and Zip Code)	<u>482</u>
For further information concerning this matter, pl	
SUSAUNE HILL MI	252 1341 2675
(Name of Contact Person) at (	Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the	E Florida Department of State for:  S55 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	- apparature or y - vira rank grove a 1

CR2E079 (5/06)

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## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	e limited liability co					
	bility company was	_	the laws of:		ALS ALS	ال 07
3. The Florida doc	:ument/registration 1	number of this lin	nited liability	company is:	CAHASSEE F	7 JUL 24 AH 10: 54
4. I, SUSAM	OOO 6604  Vame of Person Resignate billity company and criting.	, h	ereby resign	as a Man Tu	AGE STA	0: 54
<b>.</b>	ibility company and riting.		d Hability coi	mpany nas been noi	nned of my	
Signature of Res	igning Member, Ma	unaging Member	or Manager			
	\$25.00 (Require \$30.00 (Option					

CR2E079 (5/06)