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Office Use Only



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08 JUL 17 PM 3: 20

A. Tealers JUL 18 2008

COVER LETTER

| Division of Corporations | |
|---|--|
| SUBJECT: Sunco Maintenance Su | |
| (Name of Lim | ited Liability Company) |
| The enclosed member, managing member or filing. | manager resignation and fee(s) are submitted for |
| Please return all correspondence concerning | this matter to: |
| Raymond S. Plagge | |
| (Contact Person) | |
| Sunco Maintenance Supply Co. I | _LC |
| (Firm/Company) | |
| 337 Commerce St. | |
| (Address) | ··· · ··· |
| Pensacola, FL 32507 | |
| (City/State and Zip Code) | |
| For further information concerning this matter | cr, please call: |
| Scott Plagge | at (850) 457-9657 |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) |
| Enclosed please find a check made payable t | o the Florida Department of State for: |
| \$25 Filing Fee | \$55 Filing Fee & |
| <u></u> , | 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 | |

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

SECRE TARY OF STATIONS ON JUL 17 PM 3:20

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

| of State is: Sunco Maintenance Supr | appears on the records of the Florida Department oly Co. LLC |
|--|--|
| 2. This limited liability company was organized to Florida | under the laws of: |
| 3. The Florida document/registration number of t L06000110481 | his limited liability company is: |
| 4. I, Danny Meeks | , hereby resign as a MGRM |
| (Print Name of Person Resigning) | (Print Title) |
| of this limited liability company and affirm the resignation in writing. | limited liability company has been notified of my |
| James Mules | |
| Signature of Resigning Member, Managing Me | mber or Manager |
| | |

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee:

Certified Copy: