

607000001091

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

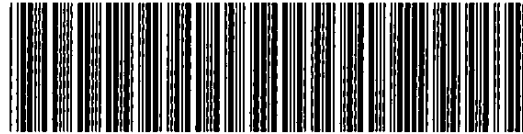
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

FEB - 7 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Contractor's Choice USA, LLC
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

ROBERT L GOMES
(Contact Person)

TXRECO/PINNACLE EMPLOYEE LEASING
(Firm/Company)

115 W OLYMPIA AVE
(Address)

PUNTA GORDA FL 33950
(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES E STEVENS EA at (941) 457-6790
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &
Certified Copy

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Contractor's Choice USA, LLC

2. This limited liability company was organized under the laws of:
FLORIDA

3. The Florida document/registration number of this limited liability company is:
L07000001091

4. I, BILL KUZMICK, hereby resign as a MGRM
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

[Signature]
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

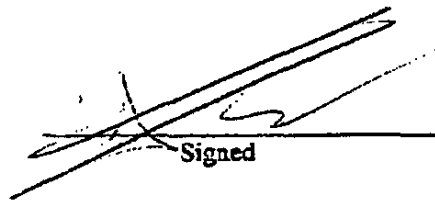
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TALLAHASSEE, FLORIDA

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CONTRACTOR'S CHOICE USA, LLC
115 W OLYMPIA AVE
PUNTA GORDA FL 33950

THIS LETTER SHALL GIVE NOTICE THAT I AM RESIGNING AS
MEMBER/MANAGER MEMBER OF CONTRACTOR'S CHOICE USA, LLC
AND I WILL NO LONGER HAVE ANY ASSOCIATION WITH CONTRACTOR'S
CHOICE USA, LLC.


Signed

William J. Krenick
Printed Name

01 January 2008
Effective Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA