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(Ac	ldress)					
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PICK-UP	☐ WAIT	MAIL				
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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Roger Polson construction (Name of Limited Liability Company)	· LLC
The enclosed member, managing member or manager resignation a filing.	nd fee(s) are submitted for
Please return all correspondence concerning this matter to:	
Roger Polson (Contact Person)	
Roger Poison Construction LLC (Firm/Company)	TAS C
6883 Beaudy in	FILE PH 1:42 ECRETARY OF STATE LLAHASSEF FLORIDA
Mi Htm. F1, 32570 (City/State and Zip Code)	PH 1: Y OF STA EF FLORI
For further information concerning this matter, please call:	TE DA
Roger Polson at (850) 98 (Name of Contact Person) (Area Code & Daytin	52-6982 me Telephone Number)
Enclosed please find a check made payable to the Florida Departme \$25 Filing Fee \$55 Filin Certif	
	ING ADDRESS: ation Section

**Division of Corporations** 

Tallahassee, Florida 32314

P.O. Box 6327

CR2E079 (5/06)

Clifton Building

**Division of Corporations** 

2661 Executive Center Circle

Tallahassee, Florida 32301



## 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					of the Flo	orida D	epartr	ment
of State is: K	ober	POLSON	construct	מטר	4	<u>C</u>		
2. This limited liab The Stat	ility compa	ny was organize				SECRETARY OF ALLAHASSEE FI	07 FEB -2 PH	
3. The Florida docu <u>LO700</u>	_		f this limited liabili 	ty comp	oany is:	STATE	1:42	
4. I, <u>Spence</u>	A.  ame of Person	Polson Resigning)	, hereby resign	n as a _	M G	R N rint Title)	<u>\</u>	
of this limited liab resignation in wri		any and affirm th	e limited liability o	company	has bee	n notifi	ied of	`my
Sysen	UM B	FRAN	1					
Signature of Resi	gning Mem	ber, Managing N	Member or Manager	r				
Filing Fee:		Required)						
Certified Copy:	\$30.00 (	Optional)						