101000013356

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
: '		

Office Use Only



100112682801

12/03/07--01011--013 **55.00

2001 DEC -3 AM II: 03
SECRETARY OF STATE
SECRETARY OF STATE

Olyy

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: GIN Accounting Services, 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:
Greta Reynolds (Contact Person)
GEN Accounting Service's LLC (Firm/Company)
18331 Pines Blvd # 213 (Address)
Pembroke Pines FL 33029 (City/State and Zip Code) For further information concerning this matter, please call: Greta Reynolds at (305) 528-6068
For further information concerning this matter, please call:
For further information concerning this matter, please call: Greta Reynolds (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 Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

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

	mited liability company as it appears on the records of the Florida Department FROM Accounting Services	
	ty company was organized under the laws of:	
L070000	nent/registration number of this limited liability company is: AFE AFE	- THE
	Reynolds , hereby resign as a Managing Member of Person Resigning) (Print Title of my ng.	1
Signature of Resign	ning Member, Managing Member or Manager	
Filing Fee: Certified Copy:	` • '	