## L07000019418

Office Use Only



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DIVISION OF CORPORATIONS
ON AUG -7 PM 2: 47

## **COVER LETTER**

TO: Registration Section Division of Corporations		7
SUBJECT: R. S. Maintenance Servi (Name of Limited Liab	vices SIC bility Company)	·
The enclosed member, managing member or managiling.	ger resignation and fee(s) are submitted	for
Please return all correspondence concerning this ma	atter to:	
Kathryn Judkins - Russo (Contact Person)	·	
Ris Maintenance Services L	210	
144 NW 1st Street (Address)		
Willistan FL 32696 (City/State and Zip Code)		
For further information concerning this matter, plea	se call:	
Kathryn Sudkins-Russo at (3 (Name of Contact Person) (Ar	rea Code & Daytime Telephone Number)	DIVIS
Enclosed please find a check made payable to the F \$25 Filing Fee	lorida Department of State for:  \$55 Filing Fee &  Certified Copy	DIVISION OF CORPORATION  O7 AUG -7 PH 2: 47
STREET/COURIER ADDRESS:	<b>MAILING ADDRESS:</b>	STZ SRA SA
Registration Section	Registration Section	<b>14</b>
Division of Corporations	Division of Corporations	* 35
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	

CR2E079 (5/06)

Tallahassee, Florida 32301



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as it appears on the	
2. This limited liab	ility company was organized under the laws o	
3. The Florida doc	ument/registration number of this limited liabi	
	C. Serrent, hereby resignme of Person Resigning)	gn as a MGRM (Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability iting.	company has been notified of my
Signature of Res	igning Member, Managing Member or Manag	er
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	