L07000046171

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(Address)					
(Address)					
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SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

TO:	Registration Section	
	Division of Corporations	
SUBJ	DECT: PICTURE PERFECT H	OMEBUILDERS, LLC
50 D 0		ted Liability Company)
The enfiling.		manager resignation and fee(s) are submitted for
Please	e return all correspondence concerning	his matter to:
Johr	n F. Roscow, IV	
	(Contact Person)	
Carp	penter & Roscow, P.A.	
	(Firm/Company)	
5608	8 NW 43rd Street	
	(Address)	
Gair	nesville, FL 32653	
	(City/State and Zip Code)	
For fu	orther information concerning this matte	r, please call:
Johr	n F. Roscow, IV	at (352) 373-7788
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclos	sed please find a check made payable to	the Florida Department of State for:
	\$25 Filing Fee	\$55 Filing Fee &
		Certified Copy
	EET/COURIER ADDRESS:	MAILING ADDRESS:
_	tration Section	Registration Section
	on of Corporations	Division of Corporations
	n Building	P.O. Box 6327
	Executive Center Circle	Tallahassee, Florida 32314
i ailah	nassee, Florida 32301	

CR2E079 (5/06)



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SECRETARY OF STATE TALLAHASSEE FLORIDA

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 a		-
2. This limited liab Florida	ility company was organized ur	nder the laws of:	
3. The Florida docu L07000046	nment/registration number of th	is limited liability con	npany is:
4. I, Christian J	. Eversole ame of Person Resigning)	_, hereby resign as a	manager/member (Print Title)
of this limited lial resignation in writer	pility company and affirm the liting.	mited liability compa	ny has been notified of my
Signature of Resi	gning Member, Managing Men	nber or Manager	
Filing Fee:	\$25.00 (Required) \$30.00 (Ontional)		