

L07000060789

(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

C. LEWIS

AUG - 4 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AAA Florida Drywall Spray
(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:

James Bonenberger
(Contact Person)

AAA Florida Drywall Spray
(Firm/Company)

3097 Rio Bonita Street
(Address)

Indianantic, Fl. 32903
(City/State and Zip Code)

For further information concerning this matter, please call:

James Bonenberger at (321) 591-9276
(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



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2009 AUG -3 PM 3:47
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**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: AAA Florida DRYWALL SPRAY

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

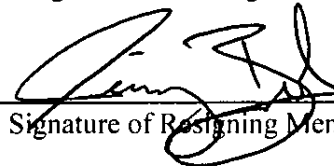
Florida

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

L07000060789

4. I, James Bonenberger, 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 of Resigning Member, Managing Member or Manager

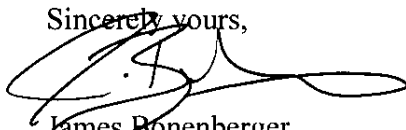
Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

July 31, 2009

To whom it may concern:

I have attached paperwork and signed forms as I wish to have my name removed with association with this company. I wish to resign. Mr. Moriya McNulty will be the sole owner and the NEW mailing address for the company will be: 5070 Wild Cinnamon Dr., Melbourne, Fl. 32901 please make sure that change is made. Should you need any further information please send to me at the below address. I have also listed my cell phone in the event you need to speak with me.

Sincerely yours,



James Bonenberger
3097 Rio Bonita Street
Indialantic, Fl. 32903

(c) 321-591-9276