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C. LEWIS

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EXAMINER

COVER LETTER

TO: Registration Section

CR2E079 (5/06)

Division of Corporations	
SUBJECT: C.R.E.W. Contractors, L	.LC
	ed Liability Company)
The enclosed member, managing member or n filing.	nanager resignation and fee(s) are submitted for
Please return all correspondence concerning the	nis matter to:
N. Jane Puckett, E.A.	
(Contact Person)	
East Washington Accounting Serv	rices, Inc.
(Firm/Company)	
PO Box 1006	
(Address)	
Pierson, FL 32180	
(City/State and Zip Code)	
For further information concerning this matter	, please call:
N Jane Puckett	at (386) 749-9010
(Name of Contact Person)	(Arca 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:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	



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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 R.E.W. Contractors, LL	appears on the records of the Florida Department C
2. This limited liab Florida	ility company was organized u	ander the laws of:
3. The Florida docu 	_	his limited liability company is:
4. I, Carl Armig	Grame of Person Resigning)	, hereby resign as a Managing Member (Print Title)
of this limited lial resignation in wr	oility company and affirm the	limited liability company has been notified of my
Signaturent Bagi	gning Member, Managing Me	mber or Manager
Signature of Resi	gning Member, Managing Me	moet of Manager
•	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	