## 107000071245

(Requestor's Name)				
(Address)				
(Address)				
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PICK-UP	☐ WAIT	MAIL .		
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(Document Number)				
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07/30/07--01038--016 \*\*25.00

SECRETARY OF STATE AS SECRETARY OF CORPORATIONS OF CORPORATIONS

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Lil' Bamboo LLC	
(Name of Li	mited Liability Company)
The enclosed member, managing member of filing.	or manager resignation and fee(s) are submitted for
Please return all correspondence concerning	g this matter to:
Robin Rawald	2
(Contact Person)	
Lil' Bamboo LLC	07 JUL 30
(Firm/Company)	
7442 Forth Donks Dond	
7142 Forty Banks Road	
(Address)	
Harmony, FL 34773	
(City/State and Zip Code)	<del></del>
For further information concerning this mat	tter, please call:
Robin Rawald	at ( 407 ) 498-2418
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable  \$25 Filing Fee	to the Florida Department of State for:  \$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 32301	Tallahassee, Florida 32314

CR2E079 (5/06)

Kim Michelle Sheets 7142 Forty Banks Road Harmony, Florida 34773

(321) 624-6194

July 26, 2007

To Whom It May Concern:

Enclosed is my payment of \$25.00 and Application for my name to be removed from Lil' Bamboo LLC.

The Lil' Bamboo, LLC will just be under the name of Robin Rawald.

Please contact me with any questions.

Thank you for your time.

Kim Michelle Sheets

Sincerely/

DIVISION OF CORPORATION



## 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 i	t appears on the records of t	he Florida Department
of State is: Lil'	Bamboo LLC		0 0
2. This limited liab	ility company was organized of Florida	under the laws of:	7 JUL 30 AM 10: 43
3. The Florida doct L0700007	ument/registration number of t	this limited liability compan	ny is:
4. I, Kim Miche		, hereby resign as a Ma	anager
of this limited lial resignation in wr	dame of Person Resigning) bility company and affirm the iting.  gning Member, Managing Me		(Print Title) as been notified of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		