

L07000093175

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

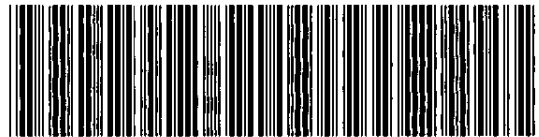
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700143762177

02/20/09--01007--030 \*\*25.00

FILED

09 FEB 20 PM 2:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

FEB 23 2009

EXAMINER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 1,2,3,Trim Carpentry llc

(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:

Keith Olson

(Contact Person)

1,2,3, Trim Carpentry llc

(Firm/Company)

5229 hardee st.

(Address)

Naples Fl, 34113

(City/State and Zip Code)

**FILED**  
09 FEB 20 PM 2:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Keith Olson

(Name of Contact Person)

at ( 239 ) 293 4601

(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



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: 1,2,3, Trim Carpentry llc

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

Florida Sec. 15.16

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

L07000093175

4. I, Karl Kolderman, hereby resign as a member  
(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.

Karl Kolderman

Signature of Resigning Member, Managing Member or Manager

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

**FILED**  
09 FEB 20 PM 2:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA