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(Pa	questor's Name)		
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	dress)		
(Au	uress)		
(Ad	dress)		
(Cit	:y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	ne)	
(Do	cument Number)		
Certified Copies	Certificates of Status		
Special Instructions to	Filing Officer:		
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Office Use Only



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2011 SEP 14 AM 11: 204 SECRETARY OF STATE

T. CLINE

SEP 15 2011

EXAMINER

COVER LETTER -

SUBJECT: Palm Beach Painters LLC DBA CertaPro Painters (Name of Limited Liability Company)							
The enclosed member, managing member or mafiling.	anager resignation and fee(s) are submitted for						
Please return all correspondence concerning this	s matter to:						
Lisa Simpson	SE SE						
(Contact Person)	2011 SEP 14 211: 04 SECRETARY OF STATE TALLIAHASSEE, FLORIDA						
palm Beach Painters LLC	Prop E						
(Firm/Company)	OR OR						
1732 S Congress Ave Suite 327							
(Address)							
Palm Springs, Fl. 333461	·						
(City/State and Zip Code)							
For further information concerning this matter,	please call:						
Lisa Simpson at	₍ 561 ₎ 7274508						
(Name of Contact Person)	(Area Code & Daytime Telephone Number)						
Enclosed please find a check made payable to the \$\sqrt{2}\$ \$15 Filing Fee	ne 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 32314						

CR2E079 (5/06)

Tallahassee, Florida 32301

TO:

Registration Section Division of Corporations



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 makes Beach Painters LLC	appears on the records	s of the Flor	rida Dep	artment	t
2. This limited liab	ility company was organized ur orida	nder the laws of:				
3. The Florida docu L0700094	nment/registration number of th	is limited liability con	npany is:	SECRET	2011 SEP 1	4-01 - 10-10 -
4. I, Lisa Simps	SON ame of Person Resigning)	, hereby resign as a	Managi (Pri	V2 =0		
of this limited liab resignation in wri	oility company and affirm the li	mited liability compar	ny has beer	note High	l of my	
Signature of Resignature	gning Member, Managing Men	aber or Manager				
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)					