

LD70000098920

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

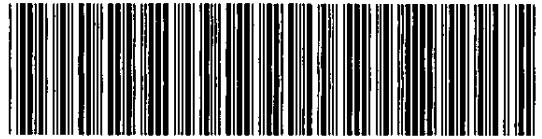
Special Instructions to Filing Officer:

L. SELLERS

DEC - 9 2008

EXAMINER

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

08 DEC - 8 AM 8:50

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: QUADRANT METAL BUILDINGS,L.L.C

(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:

DANIEL OCHSE

(Contact Person)

QUADRANT METAL BUILDINGS,L.L.C

(Firm/Company)

5705 BRIARGATE LANE

(Address)

FORT PIERCE,FL 34981

(City/State and Zip Code)

For further information concerning this matter, please call:

DANIEL OCHSE

(Name of Contact Person)

at (772) 6338200

(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: QUADRANT METAL BUILDINGS, L.L.C

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

3. The Florida document/registration number of this limited liability company is:
L07000098920

4. I, DANIEL OCHSE, hereby resign as a MANAGER/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.

Signature of Resigning Member, Managing Member or Manager

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

FILED
08 DEC -8 AM 8:50
SECRETARY OF STATE
TALLAHASSEE FLORIDA