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(Requestor's Name)				
(Address)				
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(City (Chata / Zin (Dh. ana 14)				
(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



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05/09/08--01009--002 **25.00

OS MAY -9 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
MAY 1 2 2008
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Worldwide	Door LLC.
(Name of Limite	d Liability Company)
The enclosed member, managing member of a	ignager recignation and fee(s) are submitted for
filing.	iatiagen resignation and rec(s) are submitted for
anda sekara ang ang ang ang ang ang ang ang ang an	Appendict to the transfer of the second seco
Pl Lase return all correspondence concerning the	is matter to:
Beth Monts De Oca (Contact Person)	
(Contact reson)	
Worldwide Door C	omponents Inc
(Firm/Company)	1944.
	AE 08
5017 N. Coolid	
(Address)	ASS.
Tampa, FL 33(0 (City/State and Zip Code)	14 (813-870-00) =
For further information concerning this matter	please call:
- 1	•
Jerry Monts De Oca; (Name of Contact Person)	(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:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327

Tallahassee, Florida 32314

2661 Executive Center Circle

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OF MANAGER NUMER OF THE PROMITE OF THE PR

	limited liability company			
	oility company was organiz	ed under the laws of:	, W.	Just to well
	7110.00		•	. Y
3. The Florida doc	ument/registration number	of this limited liability of	company is:	Sparking 1
4. I, Jerry (Print N	Monts De Clame of Person Resigning)	hereby resign as	aMGR	Print Title)
	bility company and affirm			
X	Alm			
Signature of Res	igning Member, Managing	Member or Manager		=
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			OS MAY -9 PM SECRETARY OF ALLAHASSEE, F