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Special Instructions to	Filing Officer:			
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C. LEWIS NOV 9 2009 **EXAMINER**

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: VENEERCRETE (Name of Lim	ited Liability Company)
The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning	this matter to:
MARK JENSEN (Contact Person)	
(Contact Person)	
VENEERCRETE, LL	C
(Firm/Company)	
891 NE DIXIE HW	Y #1
(Address)	
JENSEN BEACH, 1	1 34957
(City/State and Zip Code)	
For further information concerning this matter	er, please call:
MAK JENSEN (Name of Contact Person)	at (712) 215 4387
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable t	o 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
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (5/06)



FILED

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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

SECRETARY OF STATE TALLAHASSEE. FLORIDA

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:	VENEERCRETE, I	UC.	·
	pility company was organized	l under the laws of:	
	nument/registration number of	f this limited liability com	pany is:
4. I, MARY	GILMER	, hereby resign as a	MGRM
(Print 1	Name of Person Resigning)		(Print Title)
resignation in w	ability company and affirm the riting. Lighting Member, Managing Member, M		y has been notified of my
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		