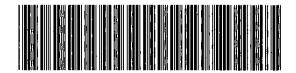
L07000109745

;			
(Requestor's Name)	_		
(Address)			
(Address)			
(City/State/Zip/Phone #)			
(englished)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status	_		
	_		
Special Instructions to Filing Officer:			
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SECRETARY OF SINIENS DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: J-By: IT Constru (Name of Limited L	iability Company)
The enclosed member, managing member or mar filing.	nager resignation and fee(s) are submitted fo
Please return all correspondence concerning this	matter to:
Robert Topp Trulock (Contact Person)	
T-Built Gustruction, LLC (Firm/Company)	
P.o. Box 600980 (Address)	
JANLSONVILLE FL 32260 (City/State and Zip Code)	
For further information concerning this matter, p	
Tood Trylock at (Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	Florida Department of State for: \$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

CR2E079 (5/06)



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 ap of State is: T-Built Construction	pears on the records of the Florida Department
2. This limited liability company was organized und	er the laws of:
3. The Florida document/registration number of this Lo7000109745	limited liability company is:
4. I, Shelley Faye TryLock (Print Name of Person Resigning)	, hereby resign as a MANA jing Member (Print Title)
of this limited liability company and affirm the liming resignation in writing.	ited liability company has been notified of my
Theren Julail 5 De	
Signature of Resigning Member, Managing Memb	er or Manager

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee:

Certified Copy: