## L07000112476

(Requestor's Name)
(requestors marrie)
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(National)
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(City/State/Zip/Phone #)
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J. BRYAN

APR 2 2 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section	·
Division of Corporations	
SUBJECT: EVERGREEN FAMILY	
(Name of Limi	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:
David Kelleher	
(Contact Person)	
EVERGREEN FAMILY SERVICE	S LLC 8 APR 21
(Firm/Company)	PR
3901 S. Ocean Dr. No 16-0	
(Address)	
Hollywood, FL 33019	2.51
(City/State and Zip Code)	<del></del>
For further information concerning this matter	er, please call:
David Kelleher	at ( 601 ) 684-3811
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee	o the Florida Department of State for: \$55 Filing Fee &
\$25 T Hing 100	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314

Tallahassee, Florida 32301

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company a ergreen Family Servi		of the Florida Depa	irtme	nt 
2. This limited liab	ility company was organize	ed under the laws of:			
3. The Florida docu LO7000112	ment/registration number o	of this limited liability con	npany is:		
4. I, SUSAN M.		, hereby resign as a	Member (Print Title)		
•	ame of Person Resigning)  pility company and affirm t  ting.	he limited liability compar	·	of m	У
Signature of Pasi	M. Mhu gning Member, Managing I	When 04/01/3008			
Filing Fee:	\$25.00 (Required)	Member of Manager		08 APR 2	WISION OF
Certified Copy:	\$30.00 (Optional)			P# 23	LED RY OF STA