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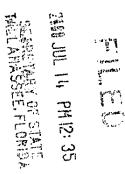
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T. CLINE

JUL 15 2008

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Commercial (Name of Lim	Renovation ited Liability Company)	Projects	LLC
The enclosed member, managing member or filing.	manager resignation and	d fee(s) are subm	itted for
Please return all correspondence concerning	this matter to:		
DARWIN L. Clayton (Contact Person)	<u> </u>		
Commercial Renovation Pr	rojects LLC		THE JUL
11460 BRidges Road (Address)	·		ERR JUL 14 PM 12: 35
JACK SONVILLE Florida (City/State and Zip Code)	-32218	٠	CRIED
For further information concerning this matter	er, please call:		
DARWIN L. Clayton (Name of Contact Person)	at ( <u>904</u> ) <u>76</u> (Area Code & Daytime	6-/0/9 e Telephone Numb	oer)
Enclosed please find a check made payable t \$25 Filing Fee	to the Florida Departmen \$55 Filing Certifie	t of State for: Fee & ed Copy	
STREET/COURIER ADDRESS: Registration Section Division of Corporations	Registrat	IG ADDRESS: ion Section of Corporations	

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

Clifton Building

2661 Executive Center Circle Tallahassee, Florida 32301



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	imited liability company as Commercial				
2. This limited liabi <u>Florida</u>	lity company was organized	under the laws of:	AFAS	THE SECTION	
L070001				PH 12: 35	1
4. I, <u>CLAUD</u> (Print Na	iA L. CLayton me of Person Resigning)	, hereby resign as	a Memilia (Prini Ti	oer <sub>Ile)</sub>	
	ility company and affirm the				y
	à L. Claytor gning Member, Managing M				
	, 6	<b></b>			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				