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(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
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Consideration to Ellips Office				
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T. HAMPTON

DEC - 1 2009

EXAMINER

COVER LETTER

TO:	Registration Section	
	Division of Corporations	
SUBJ	ECT: J & E Equipment of N.	
	(Name of Limit	ted Liability Company)
The er filing.		manager resignation and fee(s) are submitted for
Please	return all correspondence concerning t	his matter to:
ERN	IIE CRIBB	
	(Contact Person)	
J & E	E Equipment of N.W. Fl. LLC	
	(Firm/Company)	
7365	5 Wymart Rd.	
-	(Address)	
Pens	sacola, Fl. 32526	
	(City/State and Zip Code)	
For fu	rther information concerning this matte	r, please call:
Ernie	e Cribb	at (850) 944-1818
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclos	sed please find a check made payable to \$\square \square \quare \qqq \quare \quare \quare \quare \quare \qq	the Florida Department of State for: \$55 Filing Fee & Certified Copy
Regist Divisi Cliftor 2661	EET/COURIER ADDRESS: tration Section ion of Corporations n Building Executive Center Circle	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

	limited liability company as E Equipment of N.W	it appears on the records of the seconds of the seconds. FI. LLC	he Florida Department
2. This limited liab Florida	ility company was organized	l under the laws of:	
3. The Florida docu L 0700012	_	f this limited liability compar	ıy is:
4. I, Joyce D. C	Cribb ame of Person Resigning)	, hereby resign as a Ma	anager (Print Title)
of this limited lial resignation in wr	oility company and affirm th	e limited liability company h	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		AON 60

CR2E079 (5/06)