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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	·
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SECRETARY OF STATE

M. Thomas FEB 2 6 2008

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: THE CLEANING BEES, (Name of Limited Liability C	LLC ompany)
The enclosed member, managing member or manager res filing.	ignation and fee(s) are submitted for
Please return all correspondence concerning this matter to	<b>:</b>
AMOEIA M. SCHUMAKER (Contact Person)	<del></del>
THE CLEANING BEES, LLC. (Firm/Company)	- SEC FER
205 PORTA ROSA CIR (Address)	AHASSEE OF
ST AUGUSTINE, FL 32092 (City/State and Zip Code)	- FORDA
For further information concerning this matter, please cal	l:
(Name of Contact Person) at (90 4)	) 891-4845 le & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida    V   \$25 Filing Fee	Department of State for:  ]\$55 Filing Fee &  Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Tallahassee, Florida 32301

CR2E079 (5/06)

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## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	_	nited liability compa	•		of the Florid	la Departmer	nt . *	
	mited liability	company was orga	nized unde	er the laws of:		OB TECHET	77 TIL	
		ent/registration numb	per of this	limited liability com	pany is:	ASSEE. FLOW	5 PM 12: 31	•
4. I,	JAMES (Print Name	SCHUMALER of Person Resigning)	·	hereby resign as a	MAHA (Print	Title)	mer mal	
	imited liabilit tion in writin	ty company and affing.	rm the limi	ited liability compar	ny has been n	otified of my	y	
Signatu	ire of Resigni	ng Membel, Manag	ing Membe	er or Manager				
Filing Fe	e:	\$25.00 (Required)						

Certified Copy:

\$30.00 (Optional)