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(Re	equestor's Name)				
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(Ci	ty/State/Zip/Phone	e #)			
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FILED SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

MAR 3 1 2008

EXAMINER

COVER LETTER

TO: Registration Section

Division of Corporations	
SUBJECT: STANDIE CONSTANTING LC	
(Name of Limited Liability Con	npany)
The enclosed member, managing member or manager resigning.	gnation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
AUDKER AMAKAI (Contact Person)	_
STANDIE CONSIMIEN LLC (Firm/Company)	_
8927 HYPOLUYO COAD # 144. (Address)	_
LAKE WEKTH FL 33467. (City/State and Zip Code)	-
For further information concerning this matter, please call:	
Αυρμα βηπιαι at (SU) (Name of Contact Person) (Area Code	239. 3666 & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida I \$25 Filing Fee	Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	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. Tł	ne name of the	limited liabilit	ty company as it ap	pears on the records	of the Florida Depa	rtmer	nt
0	f State is:	STANDIE	CONSTMICTION	LLC.		 ·	
2. Tł	nis limited liab	oility company	was organized unde	er the laws of:			
_	Fluris	А					
3. Tł	ne Florida doc	ument/registrat	tion number of this	limited liability comp	pany is:		
	L0800	0003295					
4. I,	ANDrea	AMALAL Name of Person Re	neignie al	, hereby resign as a _	MGRM. ()	nc ma	ing) seik)
	·	bility company	and affirm the lim	ited liability compan	y has been notified	of my	у
	andre	e Am	and				
Sig	mature of Res	igning Member	r, Managing Memb	er or Manager			
		\$ <u>25.00 (Re</u> \$30.00 (Op				08 MAR 28	SECRETAR DIVISION OF C

CR2E079 (5/06)