108000005329

•		
	(Requestor's Name)	
•	(Address)	
	(Address)	
·	(City/State/Zip/Phone #)	<u> </u>
PICK-UF	P WAIT	MAIL
	(Business Entity Name)	
	(Dusiness Ethiny Name)	
	(Document Number)	·
Certified Copies	Certificates of s	Status
Special Instructions	to Filing Officer:	
		_
		(
i i		
L		

Office Use Only



700120006457

03/12/08--01008--013 **25.00

FILED
SECRETARY OF STATE
SECRETARY OF STATE
SEVISION OF CORPORATIONS

J. BRYAN

MAR 1 2 2008

EXAMINER

COVER LETTER

Registration Section

Tallahassee, Florida 32301

CR2E079 (5/06)

TO:

Divisio	on of Corporation:	S				
SUBJECT: _	NORLAND	SECURITY	SERVICES	L.L.C.	_	
		(Name of Limited	d Liability Company	·)		
The enclosed rations.	member, managin	g member or m	anager resignatio	on and fee(s) are submitted	d for	
Please return a	ill correspondence	concerning th	is matter to:			
	Orlando Gar (Contact Per	cia	-	-		
	(Contact Per	son)	·			
Nor	land Securit	Y Services				
	(Firm/Comp	any)			0	9
					<u>~</u>	N S
	9122 NW	177 TERR.			Æ	2
	(Address)		 -		12	UT C
MI	AM FL (City/State and 2	33018			08 MAR 12 PM 2:	DIAISING OF COM SHALL
	(City/State and	Zip Code)			12	
For further inf	ormation concern	ing this matter,	please call:		œ	
Orlan	do Garcia me of Contact Person	a	t(786)	301 3863	_	
(Nar	me of Contact Person	on)	(Area Code & D	301 3863 aytime Telephone Number)	_	
				rtment of State for:		
[\$25 Filing Fee	•		Filing Fee &		
			C	ertified Copy		
STREET/CO	URIER ADDRE	SS:	MA	ILING ADDRESS:		
Registration S	ection			sistration Section		
Division of Co	•			ision of Corporations		
Clifton Buildin	_			Box 6327		
7661 Evecutive	a Center Circle		Tall	lahaccaa Florida 3731/		



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company JORLAND SECURIT	as it appears on the records of the Florida I	Department
2. This limited liab	lity company was organiz	zed under the laws of:	08 MAR 12
	ment/registration number	of this limited liability company is:	CORPORATIONS 2 PM 2: 28
•	ame of Person Resigning) wility company and affirm	, hereby resign as a MANAGENA ME (Print Title the limited liability company has been noti	le)
Signature of Resi	gning Member, Managing	g Member or Manager	. , .
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		