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Office Use Only



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S. HAWKES

MAY 2 5 2010

EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: Government Verification, LLC (Name of Limited Liability Company)	
The enclosed member, managing member or mafiling.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning this	s matter to:
Joe Glennon	
(Contact Person)	
. (Firm/Company)	
2703 Micah Dr.	The state of the s
(Address)	Fig. 1. Since the property of
Trinity, FL 34655	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
Joe Glennon at	813 343-7017
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	ne Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	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

appears on the records of the Florida Departmen _C
nder the laws of:
is limited liability company is:
, hereby resign as a Mgrm
(Print Title)
imited liability company has been notified of my

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee:

Certified Copy: