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COVER LETTER

TO: Registration Section Division of Corporations

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(Kent Ī SUBJECT: (Name of Limited Liabili

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

imn/Company) (Address) (City/State and Zip Code) For further information concerning this matter, please call: at (904 UQ. (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for \$25 Filing Fee \$55 Filing Fee & Certified Copy frendy Sent STREET/COURIER ADDRESS: **MAILING ADDRESS: Registration Section** Registration Section **Division of Corporations** Division of Corporations **Clifton Building** P.O. Box 6327 Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301 CR2E079 (5/06)



FILLED 10 SEP 10 PM 12: 07 SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: <u>Rent Solutions Property Services</u>, <u>(()</u>.

2. This limited liability company was organized under the laws of F_{10}

3. The Florida document/registration number of this limited liability company is:

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4. I hereby resign as a <u>a</u> (Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Resigning Member, Managing Member or Manager

Filing Fee: Certified Copy: \$25.00 (Required) \$30.00 (Optional)

CR2E079 (5/06)