questor's Name)	
dress)	
dress)	
y/State/Zip/Phone	÷#)
WAIT	MAIL
siness Entity Nam	ne)
cument Number)	<u> </u>
_ Certificates	of Status
Filing Officer:	
	dress) dress) //State/Zip/Phone WAIT siness Entity Name cument Number) Certificates

Office Use Only



100163749761

02/19/10--01031--014 **25.00



S. HAWKES
FEB & 2 7000

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: G& Superior LLC (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
MR Willy Pierre
Gd Sulerior
6252 WILLOCHBYCIR
LAKe Watk FL 33463 (City/State and Zip Code)
For further information concerning this matter, please call:
Pierre Willy at (561) 598-1808 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 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

CR2E079 (5/06)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAG FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPAN