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D. BRUCE
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EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Merritt Island Flooring Concepts, (Name of Limited Liability Con	
The enclosed member, managing member or manager resig filing.	nation and fee(s) are submitted for
Please return all correspondence concerning this matter to:	
Sandra H Rubin	
(Contact Person)	•
Merritt Island Flooring Concepts, LLC	
(Firm/Company)	SE SE
1605 N. Courtenay Parkway	AUG THE ANG
(Address)	ARY OF A
Merritt Island, Florida 32953	E.F.C
(City/State and Zip Code)	STATE ORI
For further information concerning this matter, please call:	> > > Om
Sandra H Rubin at 321	455-2201
(Name of Contact Person) (Area Code	& Daytime Telephone Number)
Enclosed please find a check made payable to the Florida II  \$25 Filing Fee  \$25 Filing Fee	Department of State for:  \$55 Filing Fee &  Certified Copy
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations Clifton Building	Division of Corporations 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

	imited liability company as ritt Island Flooring Co	• -	s of the Florida Department
2. This limited liabil Florida	ity company was organized	under the laws of:	
	ment/registration number of	this limited liability cor	mpany is:
4. I, Lewis	me of Person Resigning)	, hereby resign as a	Owner/Manager (Print Title)
resignation in writ	S A	20	ny has been notified of my
Signature of Resig	ning Member, Managing M	lember or Manager	OS TALL
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		AUG-6 AN CRETARY OF AHASSEE, FI

CR2E079 (5/06)