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estor's Name)				
(Address)				
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tate/Zip/Phon	e #)			
☐ WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
Certificate	s of Status			
Special Instructions to Filing Officer:				
	ss) tate/Zip/Phon WAIT ess Entity Na nent Number			

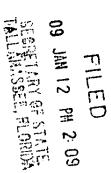
Office Use Only



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Res 108-59670



N. CAUSSEAUX

JAN 1 3 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: TIFFANIES GENERAL CO (Name of Limited Liability of Company)		
(Name of Emilied Liability (Company)	
The enclosed member, managing member or manager refiling.	signation and fee(s) are submitted for	
Please return all correspondence concerning this matter to	to:	
STACIE LYNN		
(Contact Person)		
TIFFANIES GENERAL CONTRACT	ING, LLC	
(Firm/Company)		
12127 BASALT DRIVE SOUTH		
(Address)	The state of the s	
JACKSONVILLE, FL 32246	A Commence of the Commence of	
(City/State and Zip Code)		
For further information concerning this matter, please ca	ll:	
(Name of Contact Person) (Area Co	de & Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida Department of State for:		
\$25 Filing Fee	S55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		

CR2E079 (5/06)



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 lir of State is:TI	nited liability company as it FFANIES GENER	appears on the records of the Florida Department AL CONTRACTING, LLC
2. This limited liabilit	ty company was organized ι	nder the laws of:
	ent/registration number of t 1059670	his limited liability company is:
4. I, STEVE N	NEWELL	, hereby resign as a MGRM
(Print Nam	ne of Person Resigning)	(Print Title)
of this limited liabil resignation in writing	• •	limited liability company has been notified of my
San Nu	nel	
Signature of Resign	ning Member, Managing Me	mber or Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	