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ALASSEE, FLORIDA

J. BRYAN
MAR 1 9 2009
EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUB	JECT: A Plus Limousine Of	South Florida LLC Limited Liability Company)
Th.		
filing		r or manager resignation and fee(s) are submitted for
Pleas	se return all correspondence concern	ing this matter to:
Roi	nald D Weaver Jr	
	(Contact Person)	SECT ALLU
ΑP	lus Limousine of South Flo	rida LLC
	(Firm/Company)	RY O
153	31 NW 3rd Street Suite 9	O9 MAR 18 AM 11: 00 SECRETARY OF STATE TALLAHASSEE, FLORID
	(Address)	ATE RIDE
Dec	erfield Beach Fl 33442	•
	(City/State and Zip Code)	
For f	urther information concerning this m	atter, please call:
Ror	nald D Weaver Jr	at (954) 725-5466
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Encl	osed please find a check made payab \$25 Filing Fee	le to the Florida Department of State for: \$55 Filing Fee & Certified Copy
	EET/COURIER ADDRESS:	MAILING ADDRESS:
-	stration Section	Registration Section
	sion of Corporations on Building	Division of Corporations P.O. Box 6327
	Executive Center Circle	Tallahassee, Florida 32314
	hassee, Florida 32301	rananassee, rionida 323 14

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as lus Limousine Of Sou	- -	of the Florida Departn	nent
2. This limited liab	ility company was organized	under the laws of:		
3. The Florida docu 	· · · · · · · · · · · · · · · · · · ·	·	·	
4. I, Norman C	outier ame of Person Resigning)	, hereby resign as a _	MGRM	·
	oility company and affirm the			my
	gning Member, Managing M	lember or Manager	SECRI FALLA	Salvego
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		AR I 8 AM : ETARY OF STA HASSEE, FLOA	TILED