(Requestor's Name)			
(Address)			
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(Address)			
(6) 101			
(City/State/	/Zip/Phone #)		
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PICK-UP	WAIT MAIL		
(Duniman)	Fully Manual		
(Business	Entity Name)		
(Document	: Number)		
0-45-40	No skiffing Anna See Oktob		
Certified Copies Certificates of Status			
Constable to the Constable			
Special Instructions to Filing Officer:			
i	j		





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10/03/11--01024--015 **25.00

C. LEWIS OCT 4 2011 **EXAMINER**

COVER LETTER

Division of Corporations	
SUBJECT: Garrett A/C,LLC	
	ted Liability Company)
The enclosed member, managing member or filing.	manager resignation and fee(s) are submitted for
Please return all correspondence concerning t	his matter to:
Garrett Linder	
(Contact Person)	
Garrett AC,LLC	
(Firm/Company)	
455 Tulip Tree Drive	
(Address)	
Lantana, FL 33462	
(City/State and Zip Code)	
For further information concerning this matte	r, please call:
Garrett Linder	at (561) 396-3852
· (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	\$55 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)

TO: Registration Section







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	s of the Florida Department
of State is: Ga	rrett A/C, LLC		
2. This limited liab	pility company was organized	under the laws of:	
3. The Florida doc L0900002	ument/registration number of 3299	this limited liability cor	npany is:
_{4. I,} Hope Gold	dstein	, hereby resign as a	Secretary
(Print N	Jame of Person Resigning)	, , ,	(Print Title)
of this limited lia resignation in wr	bility company and affirm the iting.	e limited liability compa	ny has been notified of my
Dose) Goldstein	>	
Signature of Res	igning Member, Managing M	ember or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		