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EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Floral Designs by Lorraine (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:
Elaine B. Bartlett (Contact Person)
Floral Designs by Lorgaine (Firm/Company)
72 Vanderford Road East (Address)
Orange Park Florida 32073 (City/State and Zip Codé)
For further information concerning this matter, please call:
(Name of Contact Person) at (104) 264-669 (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  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle Tallahassee, Florida 32301



## 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 limited liability company as it appears on the records of the Florida Department of State is: Florida Department De Signs by Lovraine Lac.
2. This limited liability company was organized under the laws of:
3. The Florida document/registration number of this limited liability company is:
4. I, Nortes E. Bartlett, hereby resign as a Member (Print Name of Person Resigning) (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
ahlf Barth
Signature of Resigning Member, Managing Member or Manager

\$25.00 (Required)

\$30.00 (Optional)

CR2E079 (5/06)

Filing Fee:

Certified Copy:

JIVISION OF BERFORATIONS