

(R	equestor's Name)	
(A	ddress)	
(A)	ddress)	
(C	ity/State/Zip/Phone #	#)
		_
PICK-UP	☐ WAIT	MAIL
	•	
(B	usiness Entity Name	e) . ;
(D	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	

Office Use Only

G. MCLEOD

DEC -1 2009

EXAMINER



700162485547

11/30/09--01006--018 **25.00

US NOV 30 PH 2: 59

SECRETARY OF STATE
DIVISION OF CORPORATION:

COVER LETTER

_	stration Section sion of Corporations	
SUBJECT:	Froemming Services LL	.c
	(Name of Limit	ed Liability Company)
The enclose filing.	d member, managing member or	manager resignation and fee(s) are submitted for
Please return	n all correspondence concerning t	his matter to:
Jeffre y F	roemming	
	(Contact Person)	
Froemmi	ng Services LLC	
	(Firm/Company)	
3441 Ma	llaig Court	
	(Address)	
Apopka,	Fl. 32712	
•	(City/State and Zip Code)	
For further i	nformation concerning this matte	r, please call:
Jeffrey F	roemming	_{at (} 407 ₎ 758-1147
(1)	Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed ple	ease find a check made payable to \$25 Filing Fee	the Florida Department of State for: \$55 Filing Fee & Certified Copy
Registration Division of Clifton Buil 2661 Execut Tallahassee,	Corporations	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 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

1. The name of the limited liability company as it of State is: Froemming Services LLC	t appears on the records of the Florida Department
2. This limited liability company was organized to Florida	under the laws of:
3. The Florida document/registration number of t L09000060631	this limited liability company is:
4. I. Felicia Hinkle-Froemming	, hereby resign as a Manager/Member
(Print Name of Person Resigning)	(Print Title)
of this limited liability company and affirm the resignation in writing. Signature of Resigning Member, Managing Member,	

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee:

Certified Copy: