109000122680

(Re	questor's Name))	
	dress)		
DA)	aress)		
(Ad	dress)		
(Cit	y/State/Zip/Phor	ne #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Na	me)	
(Document Number)			
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S. HAWKESJAN 5 2010

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations		
	Division of Corporations		
SUBJ	ECT: Adkison Roofing LLC		
	(Name of Lin	ited Liability Company)	
The enfiling.		r manager resignation and fee(s) are subn	nitted for
Please	e return all correspondence concerning	this matter to:	
Benj	jamin A. Adkison		
	(Contact Person)	Control of the Contro	
Adki	son Roofing LLC		
	(Firm/Company)		
4033	3 24th St SW		
	(Address)		
Lehi	gh Acres, FL 33976		
	(City/State and Zip Code)		
For fu	arther information concerning this mat	er, please call:	
Ben	Adkison	at (239) 896-0421	
	(Name of Contact Person)	(Area Code & Daytime Telephone Num	ber)
Enclo	sed please find a check made payable	to the Florida Department of State for:	
	\$25 Filing Fee	\$55 Filing Fee &	
	<u>-</u>	Certified Copy	
STRE	EET/COURIER ADDRESS:	MAILING ADDRESS:	
Regist	tration Section	Registration Section	
	ion of Corporations	Division of Corporations	1
	n Building	P.O. Box 6327	
	Executive Center Circle	Tallahassee, Florida 323	14
I allah	nassee, 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 limited liability company as it a of State is: Adkison Roofing LLC	ppears on the records of the Florida Department
This limited liability company was organized un Florida	der the laws of:
3. The Florida document/registration number of thi L09000122680	s limited liability company is:
4. I, Richard Allen Poulston (Print Name of Person Resigning)	_, hereby resign as a Managing Member (Print Title)
of this limited liability company and affirm the linguistic resignation in writing.	mited liability company has been notified of my
Signature of Resigning Member, Managing Mem	ber or Manager

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee:

Certified Copy: