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(Re	questor's Name)	
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(Do	cument Number)	
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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

JUL - 7 2010

EXAMINER

COVER LETTER

	tion Section of Corporatio	ns				
SUBJECT:	SRI	STONE	LLC-	nnony)		
		(Name of Lim	ited Liability Co	mpany)		
The enclosed me	ember managi	ing member ar	manager resid	onation and	l fee(s) are s	ubmitted fo
filing.	·	ing member or		Sharron and	i roo(a) aré a	, apininted to
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	ARLES,	Dr 3.	4104		•	
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For further info	rmation conce	rning this matt	er inlease call:			
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(Nam	e of Contact Per	rson)	· (Area Code	z & Dayume	e Telebilone i	Nulliber)
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	\$25 Filing F			\$55 Filing	Fee &	
LZ_			<u> </u>	Certifie	ed Copy	
STREET/COU		ESS:			G ADDRE	SS:
Registration Sec			**		ion Section	
Division of Cor	•				of Corporati	ions
Clifton Building				P.O. Box		22214
2661 Executive				i ananass	see, Florida 3	3231 4

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 of State is:	limited liability company as	it appears on the records	of the Flo	orida Dep	artment
_	oility company was organized	l under the laws of:	· .		
	ument/registration number of	f this limited liability com	npany is:		
· (Print N	J. Mice ER Jame of Person Resigning) bility company and affirm th		(Pr	int Title)	
resignation in wr		- mined natinty compar	; ; ;	ii nottiieu	·
Signature of Res	igning Member, Managing N	lember or Manager	•		
Filing Fee:	\$25.00 (Required)				5
Certified Copy:	\$30.00 (Optional)				