(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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SECRETARY OF STATE

COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: 5097HEA51 M	ETAL Supply, LLC
(Name of Limited L	iability Company)
The enclosed member, managing member or man filing.	ager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
TERRENGE M. BERKERS	·
IERRENCE M. BERKERS (Contact Person)	
SOUTHEAST METAL Suppl	4,44
(Firm/Company)	
2360 CLARK ST, 4H (Address)	
APOPKA FL. 32703 (City/State and Zip Code)	
For further information concerning this matter, ple	ease call:
TIGRIDENCE M. BORKERY	407 \ 458-9755
(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
	сышей сору
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
Cirtur Durang	F.O. DOX 0327

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 of State is:	liability company as it a		<u>-</u>
2. This limited liability con		der the laws of:	
3. The Florida document/r	egistration number of this	s limited liability com	pany is:
61000003	10326		
4. I, Rickey L. Print Name of P	Houseman erson Resigning)	_, hereby resign as a _	MG. MBR. (Print Title)
of this limited liability coresignation in writing.	ompany and affirm the lin	nited liability company	y has been notified of my
Signature of Resigning N		ber or Manager	
	,	The second secon	
	00 (Required) 00 (Optional)		₽

CR2E079 (5/06)

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SECRETARY OF STATE