L10000020326

(Requestor's Name)
(Address)
·
(Address)
(,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Dodamone Hambor)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400213905924

400213905924 11/04/11--01001--007 **25.00

RECEIVED FILEI

11 NOV -3 PM 3: 39 11 NOV -3 PM :

01 NOV -3 PM 3: 39 11 NOV -3 PM :

B. BOSTICK

NOV 3 - 2011

COVER LETTER

£ 5 50

TO: Registration Section Division of Corporations	
SUBJECT: Southeast Mef (Name of Limited Liability)	al Supply, LLC
The enclosed member, managing member or manager refiling.	esignation and fee(s) are submitted for
Please return all correspondence concerning this matter	to:
Thomas Scott Stewart (Contact Person)	<u> </u>
	SEC.
(Firm/Company)	AHAS
ZD8 Mill Creek rd	
Crawfordville Fla 32327 (City/State and Zip Code)	
For further information concerning this matter, please ca	ıll:
Scott Stewart at (850) (Name of Contact Person) (Area Co	ode & Daytime Telephone Number)
Enclosed please find a check made payable to the Florid \$25 Filing Fee	a Department of State for: \$55 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
2661 Executive Center Circle	Tallahassee, Florida 32314

CR2E079 (5/06)

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 of State is:	Limited liability company as	s it appears on the records of Supp	of the Florida Departm	ent ·
2. This limited liab	ility company was organized	d under the laws of:		
3. The Florida docu 	ment/registration number o	f this limited liability comp	oany is:	
4. I, <u>Scott</u> (Print No.	ame of Person Resigning)	, hereby resign as a	MGRM (Print Title)	 -
of this limited liab resignation in wri	oility company and affirm the ting.	ne limited liability company	has been notified of r	ny
Signature of Resi	gning Member, Managing M	Member or Manager	SECRET FALLAH)	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	·	ASSEE, FLORI	<u>U</u>