L'1000035029

(Re	equestor's Name)			
(Address)				
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
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C. LEWIS

AUG 2 0 2010

EXAMINER



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: B & B Services of NE Florida LLC (Name of Limited Liability Company) The enclosed member, managing member or manager resignation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Joseph J. Betros (Contact Person) B & B Services of NE Florida LLC (Firm/Company) 511 East Minnesota A 32063 Macc (City/State and Zip Code) For further information concerning this matter, please call: Joseph J. Betros (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: **✓** \$25 Filing Fee \$55 Filing Fee & Certified Copy STREET/COURIER ADDRESS: **MAILING ADDRESS: Registration Section** Registration Section

Division of Corporations

Tallahassee, Florida 32314

P.O. Box 6327

CR2E079 (5/06)

Clifton Building

Division of Corporations

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

	limited liability company as AB Services of NE Flor		of the Florida Department		
2. This limited liab	vility company was organized	under the laws of:			
3. The Florida doc L1000003	ument/registration number of 5029	this limited liability com	pany is:		
_{4. I,} Jack A. Baker, III		, hereby resign as a	, hereby resign as a Member		
(Print N	lame of Person Resigning)	<u> </u>	(Print Title)		
of this limited lia resignation in wr	bility company and affirm the iting.	limited liability compan	y has been notified of my		
Signature of Res	igning Member, Managing M	ember or Manager			
Filing Fee:	\$25.00 (Required)				
Certified Copy:	\$30.00 (Optional)				