## L10000061023

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
(01),011.02.19/1 110/10 11/						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
,						

Office Use Only



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DIVISION OF CORPORATION

T. HAMPTON

Sept 2010

EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJ	ECT: Essential Executive Solu					
The enfiling.	nclosed member, managing member or m	anager resig	gnation and fee(s) are submitted for			
Please	e return all correspondence concerning this	is matter to:				
Krys	stal N. Lugg					
	(Contact Person)		_			
Essential Executive Solutions, LLC						
	(Firm/Company)		-			
8937 Springtree Lakes Drive						
	(Address)		_			
Sunrise, FL 33351						
	(City/State and Zip Code)		_			
For further information concerning this matter, please call:						
Krys	stal Lugg	<sub>t (</sub> 954	, 598-4239			
	(Name of Contact Person)	(Area Code	& Daytime Telephone Number)			
Enclos	sed please find a check made payable to t \$25 Filing Fee	he Florida I	Department of State for: \$55 Filing Fee & Certified Copy			
	CET/COURIER ADDRESS:		MAILING ADDRESS:			
_	tration Section on of Corporations		Registration Section Division of Corporations			
	on of Corporations n Building		P.O. Box 6327			
	Executive Center Circle		Tallahassee, Florida 32314			
	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

	limited liability company as sential Executive Solu		of the Florida Department
2. This limited liab Florida, Un	ility company was organized	d under the laws of:	
3. The Florida docu <u>L1000006</u>	ument/registration number o	f this limited liability con	npany is:
of this limited lial	ame of Person Resigning)  pility company and affirm th		Managing Member (Print Title) ny has been notified of my
Signature of Resi	gning Member, Managing N	Member or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		al VIII