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SECRETARY OF STATE
AND ANASSEE. FLORID.

J. BRYAN

APR -1 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Liberty Mechanical Insulation 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:

Gayle Honsen
(Contact Person)

Liberty Mechanical Insulation

2881 NE 33 CT #4B

Fat Landerdale, Fl 33306
(City/State and Zip Code)

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For further information concerning this matter, please call:

(Name of Contact Person) at (954) 328 2568 (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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	imited liability company as it			nent
2. This limited liabil	ity company was organized u	nder the laws of:		
3. The Florida docur	nent/registration number of the		any is:	
4. I, GAJE	HANSEN me of Person Resigning)	, hereby resign as a _C	perating (Print Title)	Manag
of this limited liabi	lity company and affirm the			
Sol	Q C			
Signature of Resig	ning Member, Managing Me	mber or Manager	11 MAR 31 SECRETARY FALLAHASS	***************************************
Filing Fee:	\$25.00 (Required)		نسير	
Certified Copy:	\$30.00 (Optional)		PM 12: 52 OF STATE E, FLORIC	Ü