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S. HAWKES
AUG 2 4 2010
EXAMINER

COVER LETTER

for

TO: Registration Section Division of Corporations
SUBJECT: Southern Style Catering & Events (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted filing.
Please return all correspondence concerning this matter to:
Jereny Moore (Contact Person)
Southern Style Catering & Events
8651 HAYDERE PAREWAY
NAVARRE Fla 32566 (City/State and Zip Code)
For further information concerning this matter, please call:
Jereny More at (850) 572-8883 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(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 \$ Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

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 MANAGERS FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	ted liability company as it appears on the records of the Florida Department theen Style Catering & Events.	
2. This limited liability of Florida	company was organized under the laws of:	
	nt/registration number of this limited liability company is:	
4. I, Mark Pa	of Person Resigning), hereby resign as a Managina Memb	er
resignation in writing.	ng Member, Managing Member or Manager	
_	\$25.00 (Required) \$30.00 (Optional)	