10000078057

(Re	equestor's Name)			
(Ac	dress)			
(Ac	ldress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Bu	isiness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
	#11			

Office Use Only



700210830797

للاولية يعرضه

08/15/11--01013--029 **25.00

2011 AUG 15 PM 3: 20
SECRETARY OF STATE

J. SAULSBERRY EXAMINER

AUG 16 2011

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Florida Brick and Pavers, L.L.C. (Name of Limited Liability Cont.)	mpany)		
The enclosed member, managing member or manager resigniling.	gnation and fee(s) are submitte	d for	
Please return all correspondence concerning this matter to:			
Thomas Burket	_		
(Contact Person)	_		
PJ Callaghan Company Inc.			
(Firm/Company)	_ TA∑	201	
10525 49th St N	L AH	2011 AUG 15	100 Sec. 100
(Address)	HASSEI	5	To All Species
Clearwater, FL 33762	 درات		(T)
(City/State and Zip Code)	- (- 0RIO	PH 3: 20	يندونية المراجعة
For further information concerning this matter, please call:	ŪA	7 20	
Thomas R Burket at (727	573-2505	_	
(Name of Contact Person) (Area Code	& Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida D \$25 Filing Fee	Department of State for: S55 Filing Fee & Certified Copy		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314		
Tallahassee, Florida 32301	rananassee, fiorida 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

	limited liability company as rida Brick and Pavers		of the Florida Department	
2. This limited liab State of Flo	ility company was organized orida	under the laws of:		
3. The Florida docu L10000078	nment/registration number of 8057	this limited liability comp	pany is:	
_{4. I,} Thomas R	Burket	, hereby resign as a _	MGRM	
(Print Name of Person Resigning)			(Print Title)	
of this limited lial resignation in wr	pility company and affirm the	e limited liability company	has been notified of my	
Signature of Resi	gning Member, Managing M	lember or Manager	2011 AUG 15 SEGRETARY TALLAHASSE	Π
Filing Fee:	\$25.00 (Required)		ARY SSE	
Certified Copy:	\$30.00 (Optional)		PM 3: 2 OF STATE E. FLORID	