#1/0000083995

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ECRETARY OF STATE

ALLAHASSEF, FLORIDA

KSALY EXAMINER DEC 29 2011

COVER LETTER

TO: Registration Section

CR2E079 (5/06)

Division of Corporations	
SUBJECT: CONTRACTOR SERV	
(Name of Lin	nited Liability Company)
The enclosed member, managing member of filing.	r manager resignation and fee(s) are submitted for
Please return all correspondence concerning	this matter to:
DIANE SHAW	
(Contact Person)	
CONTRACTOR SERVICES AND	PERMITTING LLC
(Firm/Company)	
1430 ACADEMY BLVD UNIT 1	
(Address)	
CAPE CORAL, FL 33990	<u> </u>
(City/State and Zip Code)	
For further information concerning this matt	er, please call:
DIANE SHAW	at (239) 218-9687 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable 1	to the Florida Department of State for:
V V 2 3 1 1 1111 G 1 0 0	Certified Copy
	•
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	,



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it ap of State is: CONTRACTOR SERVICES	
2. This limited liability company was organized und FLORIDA	er the laws of:
3. The Florida document/registration number of this L 10000083995	limited liability company is:
4. I, ALAN SMALL (Print Name of Person Resigning)	, hereby resign as a MANAGING MEMBER (Print Title)
of this limited liability company and affirm the limited resignation in writing. Signature of Resigning Member, Managing Member	ited liability company has been notified of my
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	