211000013833

	•	
(R	equestor's Name)	
(Ad	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	e #)
_	☐ WAIT	MAIL MAIL
(B	usiness Entity Nan	ne)
(D	ocument Number)	<u>, </u>
Certified Copies	Certificates	s of Status

Special Instructions to Filing Officer:

A. LUNT

APR -2 2011

EXAMINER

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Detail Management, LL	C	
(Name of Limit	ted Liability Company)	
The enclosed member, managing member or a filing.	manager resignation and fee(s) are submitted for	
Please return all correspondence concerning t	his matter to:	
Kim Stanfield		
(Contact Person)		
The Hogan Law Firm, LLC	2812 ALC	
(Firm/Company)	10-1 No	
20 So. Broad Street	ZMAR 30	
(Address)		
Brooksville, FL 34601		
(City/State and Zip Code)		
For further information concerning this matter	r, please call:	
Kim Stanfield	at (352) 799-8423	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to \$25 Filing Fee	the Florida Department of State for: \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida/32301:4	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

1. The name of the limited liability company as it appears on the records of the Florida	Departm	ent
of State is: DETAIL MANAGEMENT, LLC	/m=4	
2. This limited liability company was organized under the laws of: Florida	ALLAHASSES.	2012 HAR 30 E
3. The Florida document/registration number of this limited liability company is: L11000013833	FORES	SI & III
4. I, WENDY COUNCE , hereby resign as a Manager		
(Print Name of Person Resigning) (Print Titl	(e)	
of this limited liability company and affirm the limited liability company has been noti resignation in writing.	fied of n	ny
Jallin Co		
Signature of Resigning Member, Managing Member or Manager		
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)		